

# Registration Form

## JAMES A. LOW RESEARCH DAY DEPARTMENT OF OBSTETRICS & GYNAECOLOGY

FRIDAY, APRIL 20, 2018  
DONALD GORDON CENTRE, QUEEN'S UNIVERSITY

### Please fill in the following form.

Submit this form to Heather Ramshaw, Dept OBGYN, Queen's University as an attachment by email to [ramshawh@queensu.ca](mailto:ramshawh@queensu.ca).

First name:

Last name:

Department:

Email address:

#### Designation:

Resident:	R1	R2	R3	R4	R5	
Medical Student: Graduation year:		2018	2019	2020	2021	
Basic Science Student:	B.Sc. Candidate	M.Sc. Candidate		Ph.D. Candidate		
Fellow						
Faculty						
Other (please specify):						

**Abstract Included:** Indicate your preference.

Oral Abstract

Poster Abstract

N/A: Attendee Only

#### I plan to attend:

Entire program

Morning session only

Afternoon session only

Other (please specify):

#### I plan to have lunch at the Donald Gordon Centre

Yes

No

#### Notes/Comments to Organizer:

Please indicate your preferences as soon as possible.  
This will allow us to estimate the number of participants attending.

**REGISTRATION AND ABSTRACT DEADLINE: 8AM MONDAY, APRIL 9, 2018**