



Presents

Rock Art 2009

34th Annual Rock Art Symposium

Saturday, November 7, 2009

8:00 a.m. – 5:00 p.m.

Registration opens at 8:00 a.m.

Morning Session begins at 9:00 a.m.

Otto Center Auditorium (San Diego Zoo)

(See map on reverse)



T-Shirt: Order your Rock Art 2009 T-shirt for \$15 (see coupon below). *We must receive T-shirt orders by October 15.*

Mugs Included: Registration includes our traditional commemorative ceramic mug. No disposable cups!

Call for Papers: To submit a paper on any area of rock art research, *send title and abstract by October 25, 2009*, via e-mail to RockArt2009@cox.net or by mail to Ken Hedges, San Diego Museum of Man, 1350 El Prado, San Diego, CA 92101. Papers for the program will be eligible for selection as long as space remains on the program. Please identify your presentation as a regular paper (20 min.), short paper (10 min.), or brief presentation (5 min.).

Can't Attend? To remain on our mailing list, check the box on the coupon below and return it to the Museum.

Become a Museum Member! Support the Rock Art Symposium and the Museum by becoming a member—receive reduced rates on Museum activities, and 10% discount on Museum Store purchases. See coupon for details.

Registration includes Museum admission for the weekend.

Send Advance Registration (or Fax credit card info) to:

Make checks payable to Museum of Man

ROCK ART
San Diego Museum of Man
1350 El Prado
San Diego, CA 92101

Fax (619) 239-2749
Phone (619) 239-2001

**All proceeds of the Rock Art Symposium support
Educational Programs of the Museum of Man**

Registration: [] x \$50.00 (general) [] x \$40.00 (Museum members and students) Total _____

T-Shirt: \$15.00 ea. Enter Quantities: [] Small [] Medium [] Large [] Extra Large

T-Shirt Order Deadline **October 15!** Total Shirt Order x \$15.00 _____

Rock Art 2009

Museum Membership (check category below) _____

I am paying by Cash, Credit Card (see below), Check

TOTAL REMITTANCE: _____

Museum Membership: Student \$20 Individual \$45 Family \$60 Friend \$125 Sponsor \$250

Name _____

Address _____

City _____ STATE _____ ZIP _____

Daytime Phone (_____) _____ E-Mail _____

For payment by credit card (MasterCard or Visa only), please provide the following information:

Card Number _____ V-code* _____ Expiration Date _____

*V-code: last three digits of the number printed on the back of your credit card

Authorizing Signature: _____

I cannot attend, but please keep me on your mailing list (check here and return coupon to address above).