



PRIMER/PERMANOVA Essentials

A Course in Multivariate Analysis for Ecology & Other Sciences

PRESENTER: Dr Adam Smith

DATES: May 19th - 23rd, 2025

HOSTED BY: California State University, Long Beach, California, USA

VENUE (in person): Hall of Science (HSCI), 1250 Bellflower Blvd., Long Beach, CA 90840, USA

or ONLINE: USA Pacific Daylight Time (UTC -7 hours)

REGISTRATION FORM (please use one form per person)

| Title: | | | | |
|--------------------------------------------------------------------------|--------|--|--|--|
| First Name(s): | | | | |
| Last Name(s): | | | | |
| Affiliation: | | | | |
| Address: | | | | |
| City: | | | | |
| State/Province: | | | | |
| Zip/Postal code: | | | | |
| Country: | | | | |
| Telephone: | | | | |
| Email: | | | | |
| Additional information required for Student Registration: | | | | |
| Institution/University: | | | | |
| Degree program (e.g., | PhD): | | | |
| Thesis title: | | | | |
| Supervisor's name: | | | | |
| Supervisor's email add | Iress: | | | |
| Please tick any of the following that apply: | | | | |
| ☐ I am a full-time student. | | | | |
| ☐ I am (or my organisation is) resident in New Zealand for tax purposes. | | | | |
| ☐ Lam (or my organisation is) resident in Australia for tay nurnoses | | | | |

| Dietary requirements: (please let us know if you have any special dietary requirements) | | | | | | |
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| Emergency Contact: (details of | a person we should con | tact for you in case o | of an emergency) | | | |
| Name: | | Telephone: | | | | |
| Email: | | | | | | |
| Registration fees (in \$USD): (p/ | lease tick the appropriat | e box below) | | | | |
| | | In Person | Online only* | | | |
| EARLY BIRD | Professional | ☐ USD \$1,050 | ☐ USD \$930 | | | |
| On or before March 31 st , 2025 | Full-time Student | ☐ USD \$750 | ☐ USD \$610 | | | |
| AFTER | Professional | □ USD \$1,200 | ☐ USD \$930 | | | |
| March 31 st , 2025 | Full-time Student | ☐ USD \$860 | ☐ USD \$610 | | | |
| Please choose one of the follow | wing 4 options: | | | | | |
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| ☐ I wish to use a <i>free</i> time-lin | Titled ilistaliation of 1 mil | VIER WILLI FEDIVIDA | WA+ IUI the course. | | | |
| ☐ I already have PRIMER 7. | | | | | | |
| _ | of my licence is | | | | | |
| ☐ I already have PRIMER 7 w | | on the state of th | | | | |
| The 4-digit serial # 0 | of my PRIMER 7 with PER | MANOVA+ licence is | · | | | |
| ☐ I wish to <i>purchase the follo</i> | | % discount (choose | one of the following): | | | |
| ☐ PRIMER 7 with PERMA | | ··· \ | | | | |
| ☐ PERMANOVA+ add-on | n only (I already have PRI of my PRIMER 7 licence is | • | | | | |
| ☐ Upgrade PRIMER 6 to | - | | | | | |
| The 4-digit serial # (middle 4 characters of key) of my PRIMER 6 licence is | | | | | | |
| The 4-digit serial # of my PERMANOVA+ add-on licence (if any) is | | | | | | |
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^{*}Note: The <u>Global Equitability Pricing</u> (GEP) discount and any other discounts for which you are eligible will be applied to software items upon invoicing, given your country of residence. Please get in touch with us directly at <u>primer@primer-e.com</u> if you wish to receive a tailored quote prior to completing your registration form.

INVOICE

Upon receipt of the completed registration form, an invoice will be sent to your email address. Payment is due within 30 days of the date of the invoice *or* by **Friday, May 9th, 2025**, whichever is earlier. Please get in touch with us directly at primer@primer-e.com if you wish to receive a tailored quote prior to completing your registration form.

| In the space below: Please provide us with any other details you would like included on your invoice, such as your organisation's GST or VAT number, etc. Also, if the invoice is to be sent to someone other than the registrant listed above (e.g., an administrator), please provide their name, affiliation, postal address, and email address. | | | | | | |
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TERMS and CONDITIONS

Please refer to <u>PRIMER-e's Standard Terms and Conditions for Courses</u>. In addition, below are PRIMER-e's <u>Specific Terms and Conditions for this Course</u>.

- Deadlines: Registration and payment must be received by the PRIMER-e office no later than Friday, May 9th, 2025. Please use one form per person. Contact PRIMER-e directly at primer@primer-e.com if you have any questions.
- Payment information: Registrants will be invoiced directly upon receipt by the PRIMER-e office
 of a completed registration form. All payments are to be made in \$USD. Payment options are
 detailed on the invoice and include:
 - by Credit/Debit Card;
 - o by Direct Electronic Bank Transfer
- **GST:** New Zealand residents will need to pay 15% Goods-and-Services Tax (GST), applied at invoice.
- Cancellation and Refund policy: The course organisers should be notified of cancellations in writing. If cancellation occurs before *Friday, May 9th*, *2025*, the total course fee will be refunded, less any associated bank fees and administration costs. If you cancel after the deadline stated above, you may send a substitute person. Please notify the PRIMER-e office and provide us with the appropriate registration details for the substitute at the time of cancellation. In the absence of a substitute, we will still refund the payment (less administration costs) *if* we succeed in filling your place. "No shows" are non-refundable and are liable for the full registration costs. In the unlikely event of a course cancellation, PRIMER-e will refund registration fees in full, but shall not refund nor be liable for any additional associated costs, expenses, or losses incurred by participants.

By submitting this registration form, I acknowledge that I commit myself to the payment of the full course fee (+ any associated software costs, if requested), as invoiced. I have taken full notice of and agree to abide by PRIMER-e's Standard Terms and Conditions for Courses, as well as the Specific Terms and Conditions for this Course, including the Cancellation and Refund policy.

| Signature: | |
|------------|--|
| Date: | |

Please return this form by email directly to our team at PRIMER-e: primer@primer-e.com