

41st Annual Meeting Society for Psychophysiological Research



Montreal, Quebec
October 10-14, 2001

Program Highlights

PRESIDENTIAL ADDRESS



“The Architecture of Emotion: Form, Function, and Dysfunction”

Robert W. Levenson
University of California-Berkeley

PRESIDENTIAL SYMPOSIUM

“The Psychophysiology of Emotion: A Decade and a Half Later”

Robert W. Levenson
University of California-Berkeley

John T. Cacioppo
University of Chicago

Richard J. Davidson
University of Wisconsin

Peter J. Lang
University of Florida

Arne Öhman
Karolinska Institute

Gerhard Stemmler
Philipps-University Marburg

Invited Addresses

Biological Contributions to Cognitive Sex Differences

Doreen Kimura, *Simon Fraser University*

Neuroimaging Studies of Language

Brenda Milner, *McGill University*

Recent Advances in Behavior Genetics and Their Interface with Psychophysiology

Richard J. Rose, *Indiana University*

Schedule

The 2001 SPR meeting will begin on Wednesday, October 10, with a day-long preconference workshop on genetics (see enclosed flyer) and an opening reception in the evening. The scientific program will begin on Thursday morning, October 11, and will conclude by noon on Sunday, October 14. The program will include invited addresses, symposia, and poster sessions, as well as social events and time to see Montreal.

Small-group lunch and dinner sessions will provide an informal setting in which to meet and share common interests. If you would like to host a special lunch or dinner, please contact the Program Chair, Francie Gabbay, via e-mail (spr2001@usuhs.mil).

Further details about these and other conference events will be posted on the SPR web site (<http://www.sprweb.org>) as they become available.

SOCIETY FOR PSYCHOPHYSIOLOGICAL RESEARCH

41st Annual Meeting ♦ October 10-14, 2001 ♦ Montreal, Quebec, Canada

ADVANCE REGISTRATION FORM

Please complete this form (type or print clearly) and mail it to SPR, PO Box 92280, Washington DC, 20090-2280; or fax it to 202-783-2083. **It must be postmarked or faxed by September 7, 2001.** After that date, please bring this completed form with you to the Le Centre Sheraton and register on-site at the SPR Registration Desk. If you have any questions, please call the SPR office at 202-393-4810.

REGISTRANT INFORMATION:

Name: _____
Last *First* *MI*

Institution: _____
As you wish it to appear on your badge. Do not exceed 40 characters.

Mailing Address: _____
City *State/Province* *Zip/Postal code* *Country*

Telephone: _____

E-mail: _____

Special Needs (*wheelchair accessibility, assistive listening device, etc.*): _____

REGISTRATION FEES *(In US dollars. Please check all options that apply.)*

SPR Conference

- | | |
|--|--------|
| <input type="checkbox"/> SPR Member | \$150 |
| <input type="checkbox"/> SPR Student Member | \$ 75 |
| <input type="checkbox"/> Nonmember | \$205 |
| <input type="checkbox"/> Student Nonmember | \$110 |
| <input type="checkbox"/> Accompanying Person Fee (optional fee for guests of meeting participants) | \$ 35 |
| <input type="checkbox"/> Deduct \$10 from your registration fee if you will definitely NOT be attending the Saturday Business Meeting and Luncheon | -\$ 10 |
| <input type="checkbox"/> Add \$20 for late registrations (after September 7, 2001) | \$ 20 |

Optional Preconference Genetics Workshop

- | | |
|---|-------|
| <input type="checkbox"/> SPR Member | \$100 |
| <input type="checkbox"/> SPR Student Member (subsidized by SPR) | \$ 25 |
| <input type="checkbox"/> Nonmember | \$150 |
| <input type="checkbox"/> Student Nonmember | \$ 50 |
| <input type="checkbox"/> Add \$10 for late registrations (after September 7, 2001) | \$ 10 |

Contribution to the Student Award Fund: \$ _____
(A \$25 contribution is recommended, but any amount would be greatly appreciated)

TOTAL AMOUNT: \$ _____

Payment must be by check or money order and must be in U.S. funds, drawn on a U.S. bank, and payable to the Society for Psychophysiological Research. (Eurochecks are NOT accepted):

OR: Please bill my MasterCard Visa Account # _____

Expiration Date: _____ Signature (required): _____

Return with payment to:

SPR, PO Box 92280, Washington, DC USA 20090-2280
*(Refunds must be requested in writing prior to September 8, 2001;
NO REFUNDS WILL BE MADE AFTER THAT DATE.)*

Hotel

SPECIAL RATES

We are delighted to offer very low hotel room rates for this year's meeting at the **Le Centre Sheraton Hotel and Towers** in Montreal: \$186 (Canadian) single occupancy and \$210 double occupancy. You are encouraged to complete your hotel reservations before September 7, 2001. After that date the hotel does not guarantee that rooms will be available or that they will honor the special rate. Room reservations should be made on the official Housing Reservation Form (page 5). Additional housing forms will be mailed upon request from the SPR Office (202-393-4810), or may be obtained from the SPR web site (<http://www.sprweb.org>).

Travel

BY AIR

Uniglobe Wings Travel is the official travel agency for this year's SPR meeting. They guarantee the lowest fares available at the time reservations are made. Uniglobe is offering 5% off the lowest excursion fare and 10% off the coach fare. If reservations are booked at least 60 days prior to departure you will receive an additional 5% discount. Your use of these special arrangements helps you to save money and helps SPR to earn credit toward future SPR meetings. To take advantage of these discounts, please contact Uniglobe Wings Travel (800-752-6646 or pamp@wingsgt.com). Please ask for Pam and identify yourself as an SPR meeting attendee.

La Quebecoise provides shuttle bus service from Dorval Airport to the hotel for approximately \$11 (Canadian) per person, one-way. No reservations are required. Taxi service to Le Centre Sheraton is available for \$28.

BY CAR

SPR and **Hertz** invite attendees at this year's SPR meeting to take advantage of discounted rental car rates. Advance reservations are required. To reserve a car, you can call Hertz at 800-654-3001 (Canada) or 800-654-2240 (United States). Specify reference CV No. 02BH0003.

Directions from Montreal-Dorval International Airport: Follow signs for Autoroute 20 Est (East) from Dorval Airport. From Autoroute 20 Est, link onto Autoroute 720 Est. Take exit Rue Guy, and at the traffic light you will be at the corner of Rue St. Marc and Rene-Levesque Boulevard Ouest (West). Turn right onto Rene-Levesque Boulevard, get into the left lane, and proceed approximately 9 blocks. On Rue Drummond turn left at the traffic light, and you will immediately see the carport entrance for the hotel on your right.

BY TRAIN

For train fares and schedules from the US, call AMTRAK at 800-872-7245. This number operates 24 hours a day, 7 days a week. For trains from elsewhere in Canada, contact VIA Rail Canada. They may be reached in Montreal at 514-989-2627. Trains arrive at Montreal's Central Train Station (Gare Centrale).

For more information contact the Montreal Visitors and Convention Bureau at 514-844-5400.

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HOTEL RESERVATION FORM

Please type or print. Complete the entire form, including arrival and departure dates. **The form must be received by the hotel no later than September 7, 2001**, but send immediately to ensure desired accommodations at convention rates. Send or fax it directly to:

Le Centre Sheraton
1201 Rene-Levesque Boulevard, West
Montreal, Quebec, Canada
Phone: 1-514-878-2000 ♦ Fax: 1-514-878-3958

SPECIAL SPR RATE = \$186 (Canadian) per night plus tax for single rooms

Rate is available from October 7 through October 17, 2001.

Reservations received after September 7, 2001 will be made on a space- and rate-available basis.

GUEST INFORMATION

Name: _____
Last *First* *MI*

Mailing Address: _____
Street *City* *State/Province*

_____ *Postal code* *Country*

Telephone (day): _____ Telephone (evening): _____

Room Type Requested (Rates exclude tax.): Single (1 Person, \$186) Triple (3 People, \$235)
 Double (2 People, \$210) Quad (4 People \$260)

Names of Additional Occupants: Persons sharing a room should send only one housing form. Room confirmation will be sent only to the person requesting the reservation.

_____ *Last* *First* *MI*

_____ *Last* *First* *MI*

_____ *Last* *First* *MI*

Special Requests: Smoking Non-smoking Handicapped Accessible Other: _____

ARRIVAL/DEPARTURE INFORMATION

Arrival: _____ (Check-in time: 3 PM)
Day *Date* *Time*

Departure: _____ (Check-out time: 11 AM)
Day *Date*

DEPOSIT INFORMATION All reservations at the Le Centre Sheraton require one night's deposit.

(A) Enclosed is a check or money order for \$ _____

(B) Enclosed is credit card information authorizing my reservation to be charged.

Check credit card: American Express Diners Club MasterCard Visa

Credit Card Number: _____ Expiration Date: _____

Print name as it appears on card: _____

Signature (required): _____

If an individual reservation is cancelled seven days or more prior to arrival, the deposit will be refunded in full. If an individual reservation is cancelled six days or fewer prior to arrival, or if the guest does not arrive on the specified date, the reservation will be cancelled for all nights and the deposit will be forfeited.

Please send this completed form directly to the Le Centre Sheraton.

SOCIETY FOR PSYCHOPHYSIOLOGICAL RESEARCH 41ST ANNUAL MEETING



Montreal is a cosmopolitan city, a gastronomic capital the equal of any major European city. Night owls and shopping enthusiasts can indulge themselves to their heart's content. You will enjoy exploring Montreal's lively arts scene, including many monuments, museums, concert halls and festivals. No doubt about it, Montreal is truly an experience!