IMAGE 2008
REGISTRATION FORM

*** ATTACH BUSINESS CARD HERE ***
- OR -
COMPLETE CONTACT INFO BELOW

_____ _____ ____ _____
Dr,Mr, Ms.. First MI Last

JOB TITLE: _____

ORGANIZATION: _____

MAILING ADDRESS:_____

_____

CITY: _____ STATE (or COUNTRY) _____ ZIP:_____

TEL NO:_____

EMAIL ADDRESS:_____
IMPORTANT: A valid, legible email address is required.

********** **FEES** **********

REGISTRATION includes admission to Technical Paper Sessions, Keynote Address, Host Presentations, Exhibit Hall, Buffet Luncheon, Mixer Party, Beverage Breaks and Conference Proceedings CD. Courses/Tutorials are extra cost options. Does not include Society membership.

REGULAR REGISTRATION FEE: $695.

PAPER PRESENTER REGISTRATION FEE (one per paper): $545
PAPER TITLE: _____
_____

REGISTRATION FEE = $_____

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PROFESSIONAL DEVEVELOPMENT COURSE/TUTORIAL FEES (optional)
Circle the Letters of the Courses you wish to attend.

MON 6:00pm	TUES 6:00pm	WED 6:00pm
(A)-or-**(B)**	**(C)**-or-**(D)**	**(E)**-or-**(F)**

REGISTERED for CONFERENCE - COURSE FEE: No.of Courses ___ x **$325** each = **$**_____

NOT REGISTERED CONFERENCE - COURSE FEE: No.of Courses ___ x **$425** each = **$**_____

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GRAND TOTAL AMOUNT = $_____

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(FOR OFFICIAL USE ONLY)

CREDIT CARD
___ American Express, ___ Discover Card, ___ Master Card, ___ Visa Card

CHECK:
Number:_____ **Payor:**_____

US Bank:_____

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