

DO NOT WRITE IN THE SPACE

Check # _____ AMT _____

USE THE ID NUMBER ABOVE YOUR NAME TO REGISTER ONLINE AT WWW.ISRICONVENTION.ORG.

2012 REGISTRANT INFORMATION

This is my first ISRI convention.

Name: First _____ Last _____

Name (For Badge): _____ Title: _____

Company (For Badge): _____

Branch/Affiliation (If Applicable): _____

Company Address: _____

City: _____ State/Province: _____ Zip/Postal Code: _____ Country: _____

Office Phone: _____ Fax: _____

E-mail: _____

2012 CONVENTION REGISTRATION FEES

	EARLY	REGULAR	LATE	
	Through Jan 31	Feb 1-Mar 16	Mar 17 and after	
ISRI MEMBERS	Full Registration as: <input type="checkbox"/> Attendee <input type="checkbox"/> Exhibitor <input type="checkbox"/> Spouse/Partner	<input type="checkbox"/> \$775	<input type="checkbox"/> \$875	<input type="checkbox"/> \$975
	Tradeshow Only Attendee (Access on 4/17 and 4/18 ONLY)	<input type="checkbox"/> \$450	<input type="checkbox"/> \$500	<input type="checkbox"/> \$550
	Child Full Registration	<input type="checkbox"/> \$250	<input type="checkbox"/> \$275	<input type="checkbox"/> \$300
	Guest Ticket to Closing Night (Available to Full Registrants only)	<input type="checkbox"/> \$175	<input type="checkbox"/> \$200	<input type="checkbox"/> \$225
	Child Ticket to Closing Night (Available to Full Registrants only)	<input type="checkbox"/> \$75	<input type="checkbox"/> \$100	<input type="checkbox"/> \$125
Join ISRI and save! www.BeMoreWithISRI.org				
NON-MEMBERS	Full Registration as: <input type="checkbox"/> Attendee <input type="checkbox"/> Exhibitor <input type="checkbox"/> Spouse/Partner	<input type="checkbox"/> \$1300	<input type="checkbox"/> \$1400	<input type="checkbox"/> \$1500
	Tradeshow Only Attendee (Access on 4/17 and 4/18 ONLY)	<input type="checkbox"/> \$700	<input type="checkbox"/> \$750	<input type="checkbox"/> \$800
	Child Full Registration	<input type="checkbox"/> \$350	<input type="checkbox"/> \$375	<input type="checkbox"/> \$400

Promotion Code: _____

If you have special needs as addressed by the Americans with Disabilities Act (ADA) or dietary concerns, please indicate:

Total amount due: \$ _____

You will receive confirmation of your registration within 2-4 weeks. Contact ISRI if you do not.

By registering to attend, you hereby grant ISRI free, irrevocable license to use your image and sound recorded by any means during the dates of the event, April 15-19, 2012.

- Please remove my name from published preregistration lists
- Please remove my fax number from all lists

PAYMENT INFORMATION

Your registration cannot be processed unless accompanied by full payment or credit card information. All registration forms must be received by ISRI **by April 6**. After that date, please register online or on-site in Las Vegas.

Check payable to ISRI enclosed

Charge to credit card

MasterCard VISA American Express

Expiration Date _____

Print Name _____

Billing Address _____

Card # _____

Signature (Must be provided as it appears on credit card to process)

What is your role in your company's purchasing decisions? (check one)

- Authorize purchases
- Influence the purchase decision
- Provide recommendations
- Not involved in purchase decisions

Refund Policy: ISRI will provide a full refund for convention registration cancellations made prior to March 17, less an administrative fee. For registration fees of less than \$500, the administrative fee is \$50. For a registration fee of \$500 or more, the administrative fee is \$100. For cancellations made after the cut-off date of March 17, ISRI will provide a refund of fifty percent of the registration fee. All requests for refunds must be made by May 4, 2012.