

APPAM 1029 Vermont Ave. NW, Suite 1150 Washington, D.C. 20005 APPAM.org

202.496.0130 <u>info@APPAM.org</u>

Group Registration Form 2013 Fall Research Conference November 7-9, Washington, D.C.

This registration form is to be completed by organizations wishing to register five (5) or more individuals for the Fall Research Conference. Please complete all sections and return the form to the address listed below.

^{**}If paying by check, do not submit payment until registration rates are confirmed and an invoice is sent to you.

Registration Rates								
Registration Type	Early Registration (7/15 - 10/3)	Regular Registration (10/4 - 11/2)	Onsite Registration (11/6 - 11/9)					
APPAM member	\$305	\$405	\$465					
Non-member	\$435	\$535	\$590					
Student member	\$95	\$120	\$165					

A. ORGANIZATIO	N INFORMATION:				
ORGANIZATION NA	ME:		PHONE	Number: :	
BILLING CONTACT:		Bi	LLING E-MAIL	:	
B. PAYMENT INFO	ORMATION:				
		CREDIT CARD	Снеск		
CARD TYPE:	VISA	Master Card	АмЕх	DISCOVER	
NAME ON CARD:					
BILLING ADDRESS:					
CITY:		STATE:		ZIP CODE:	_
CARD #:		-	CVC:	Fxp. Date:	

^{*}Individual membership status will be verified before payment is accepted.



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C. Registrant Information:			Ticketed Events				
Name	E-mail	APPAM Member?	Registration Price (\$)	Spencer Foundation Lecture & Breakfast	Lee Hamilton Luncheon (+\$25)	Membership & Awards Luncheon (+\$25)	Total (\$)
					TOTAL		