



REGISTRATION FORM

First Name _____
Last Name _____
Name on badge _____
Company/Organization _____
Address Line 1 _____
Address Line 2 _____
City _____
US State/Canadian Province _____
Int'l State/County/Province (non US/Canada) _____
Zip (Postal Code) _____
Country _____
Work Phone _____
email _____
Special Requirements (e.g., meals, access) _____

TYPE	Early Registration On or before 3/31/10	Regular registration 4/1/10 – 4/30/10	Late/on-site registration 5/1/10 – on site
Member	<input type="checkbox"/> \$US 495	<input type="checkbox"/> \$US 595	<input type="checkbox"/> \$US 695
Non-members	<input type="checkbox"/> \$US 545	<input type="checkbox"/> \$US 645	<input type="checkbox"/> \$US 745
<input type="checkbox"/> \$25 (Non-members can get the member rate by paying a one-time membership fee of \$25)			
Daily	<input type="checkbox"/> \$US 295	<input type="checkbox"/> \$US 345	<input type="checkbox"/> \$US 395
Students	<input type="checkbox"/> \$US 325	<input type="checkbox"/> \$US 375	<input type="checkbox"/> \$US 425
Additional Banquet Tickets (\$US 100 each)			
Number of Tickets _____ Total Extra \$US _____			

TOTAL PAYMENTS * \$US _____ ***Note:** If funds are transferred from a location outside the United States, a bank check or wire transfer is required.
 Contact Dr. Jog for details regarding wire transfers. Additional fees may apply.

Remit Checks to:

Dr. Milind A. Jog
RE: ILASS-Americas 2010
 Department of Mechanical Engineering
 University of Cincinnati
 P. O. Box 210072
 Cincinnati, OH 45221-0072

Email: Milind.Jog@uc.edu

Make checks payable to ILASS - Americas