Registration Form

CSTE Annual Conference Kansas ♥City
June 9 – 12, 2002

Participant Information (please print)

Name _____ Degrees _____

Organization _____

Title _____

Address _____ City _____ State _____ Zip _____

Work Phone _____ Fax _____ E-mail _____

(Please select one)

Affiliation: ☐ CSTE Member ☐ SENSOR/ABLES ☐ NASPHV ☐ Other _____

Conference Registration

To register at the member rate, your membership must be current with CSTE through 12/31/02. If your membership cannot be verified, you will be charged the non-member rate.

	Early Before May 3	After May 3 and On-Site	Indicate Amounts
Member Fees:			
☐Full Conference	$ 275	$ 315	_____
☐Two Day	$ 175	$ 215	_____
☐One Day	$ 125	$ 165	_____
☐Pre-Conference Workshop	$ 40	$ 55	_____
Non-Member Fees:			
☐Full Conference	$ 315	$ 355	_____
☐Two Day	$ 220	$ 255	_____
☐One-Day	$ 170	$ 205	_____
☐Pre-Conference Workshop	$ 50	$ 65	_____

Opening Reception/Off-Site Social at Union Square

Each Registrant receives one complimentary ticket, this is for additional tickets

Monday Evening, June 10 $ 20 $ 35 _____ X ____ Tickets

CSTE President's Banquet / Jonathan Mann Lecture

Tuesday Evening, June 11 $ 25 $ 45 _____ X ____ Tickets

CSTE New Member Annual Dues $30: $ 30 $ 30 _____

(I am not a member of CSTE, but I would like to join and take advantage of the discounted member registration rates. Please make me a new member.)

Total Due _____

Payment Information / Cancellation Policy

☐Check enclosed Check#_____ Amount _____

Mailing Instructions: Make checks payable to **CSTE**. Mail form and payment to:

CSTE National Office
2872 Woodcock Blvd., Suite 303
Atlanta, GA 30341

If paying by credit card, please complete the on-line registration form or you may fax this completed form to (770) 458-8516. Purchase orders and/or training authorization forms are not accepted. Registrants are personally responsible for all money due.

☐American Express ☐MasterCard ☐VISA

Name of Cardholder _____

Card# _____ Expiration Date _____

Signature _____
(required, authorizing charge and acknowledging cancellation policy)

Cancellation Policy: Notice of cancellation must be received in writing at CSTE no later than May 3, 2002. A cancellation fee of $50 will be deducted from meeting registration if notice is received after May 3, 2002. Refunds for food and beverage will not be given after the early registration deadline of May 2, 2002.
For more information, call the CSTE National Office at (770) 458-3811or visit our website at www.cste.org.