

ACMA Lobby Day Fly In April 14-15, 2010



REGISTRATION FORM

Please type or print the following information, as it should appear on your badge. Please fill out a separate form for each additional attendee.

Attendee Name _____ Suffix/CCT: _____

Company _____

Title: _____

Address _____

City _____ State _____ Zip _____ Country _____

check here if this is a home address

Phone _____ Fax _____ Email _____

Cell Phone Number – Very Important!: _____

CONFIRMATIONS

Confirmations will be sent by email if a valid email address is provided, or sent via fax if no email address is provided. No confirmation will be sent for registrations without an email address or fax number provided. Confirmations will be sent following processing of payment, please allow up to 5 days for receipt of your confirmation letter.

ATTENDEE DEMOGRAPHIC INFORMATION	REGISTRATION FEES AND TYPES
<p>(A) Are you a Member of ACMA? <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Check here if you would like to receive membership information.</p> <p>(B) Are you a (check one only): <input type="radio"/> Manufacturer <input type="radio"/> Supplier <input type="radio"/> Distributor <input type="radio"/> Educator <input type="radio"/> Student <input type="radio"/> Other: _____</p> <p>(C) Which best describes your job function? <input type="radio"/> CEO/Owner <input type="radio"/> Purchasing <input type="radio"/> Corporate/Technical Mgmt. <input type="radio"/> Engineer <input type="radio"/> Sales and Marketing <input type="radio"/> Professor <input type="radio"/> EH&S Responsibilities <input type="radio"/> Hourly Employee <input type="radio"/> Customer Service/Support <input type="radio"/> Other: _____</p> <p>(D) When it comes to buying influence do you: <input type="radio"/> Make the final decision <input type="radio"/> Recommend/influence a decision <input type="radio"/> Have no buying influence</p> <p>(E) How many educational events do you attend per year? <input type="radio"/> 1 - 3 <input type="radio"/> 4 - 6 <input type="radio"/> 7 - 10 Please specify these events: _____ _____ _____</p>	<p>ACMA MEMBER REGISTRATION Full Event <u>Regular</u> <input type="radio"/> \$299</p> <p>ACMA NONMEMBER REGISTRATION Full Event <u>Regular</u> <input type="radio"/> \$359</p> <p>MAGAZINE SUBSCRIPTION <input type="radio"/> Please check here for a <u>complimentary</u> subscription to Composites Manufacturing (CM) magazine.</p> <p><i>No onsite registrations. All registrations must be made in advance and received by COB on Monday, April 12. Payment must accompany the registration form.</i></p>

PHOTOGRAPHY, CANCELLATION & SUBSTITUTION POLICY

Cancellations and substitutions must be submitted in writing by email to events@acmanet.org; or by fax to 703-525-0743. Cancellations received by March 31, 2010, will receive a refund less a \$50 processing fee. No refunds will be given for cancellations made after March 31, 2010. Substitutions and changes may be submitted until March 31, 2010. After this date, all substitutions must be made onsite at the ACMA Registration Desk. Registration and attendance at, or participation in, ACMA meetings and other activities constitutes an agreement by the registrant to ACMA's use and distribution (both now and in the future) of the registrant's or attendee's image or voice in photographs, videotapes, electronic reproductions, and audiotapes of such events and activities.

PAYMENT INFORMATION

Please fill out the payment information section and fax your registration form to: 703-525-0743; or mail to: ACMA Conference Registration, 1010 N. Glebe Road, Suite 450, Arlington, VA 22201. Checks should be made payable to the American Composites Manufacturers Association (ACMA).

Check Visa MasterCard American Express

Total Payment: \$ _____

Account #: _____ Exp. Date _____

Name on Card: _____

Signature: _____

SPECIAL NEEDS or DIETARY REQUIREMENTS?

If you require special accommodations or assistance during your stay please check here and provide a written description of your needs. _____