

REGISTRATION GUIDELINES

1. **Registration received by Friday, December 7, 2007 receives complimentary admission to any of the workshop(s).** Registration must be received and workshop(s) must be indicated on the form in order to take advantage of this offer. Registration **Confirmation** and your **Parking Map/Info** will be mailed to you.
2. Checks should be made payable to **Instrumentation Symposium**. (*Do not send cash through the mail for preregistration.*)
3. Cash, checks, or credit cards (MC/VISA/AmEx/Discover) are accepted for on-site registration. State law forbids billing of fees.
4. **Workshops:** Attendance at a Workshop is based on a first-to-register basis. The sizes of the Workshops are limited. *Preregistration for the Workshops is encouraged. Remember: If you register by December 7, 2007, the workshops are included in the registration fee. After this date, a nominal fee of \$10/workshop will be assessed to the registration fee.*
5. Registrations not accompanied by full payment of fees will not be accepted.
6. **For registrant's unable to attend, fees will be refunded if requested in writing by Friday January 4, 2008.**
7. A **registration form** must be completed for **each individual, including complimentaries**. (This form may be photocopied.)

For more information, please visit our website at <http://instrumentation-symposium.tamu.edu>



PARKING



Parking is available at the West Campus Parking Garage. University Center Parking Garage has a limited number of spaces available. These spaces are on a first-come, first-serve basis. Maps to both parking garages will be issued with all confirmation letters.

MAIL COMPLETED FORM & REMITTANCE TO:

Instrumentation Symposium
ATTN: Kay Sanders
Conferences Services
Drawer H-1, Aggieland Station
College Station, TX 77844
Phone: (979) 845-8904 * Fax: (979) 845-2519

2008 Texas A&M Instrumentation Symposium

Registration

LAST NAME	FIRST NAME	MDL. INT.
COMPANY/INSTITUTION		
MAILING ADDRESS		
CITY	STATE/COUNTRY	ZIP/POSTAL CODE
TEL:	FAX:	EMAIL:

Check only ONE box: Vendor Contractor User Other
 If applicable, check one: Speaker Workshop Leader Session Chair Committee

NOTE: Email address will be used to notify participants of future symposium announcements or events

<u>REGISTRATION</u>	<u>WORKSHOPS</u>	<u>BBQ</u>	<u>PAYMENT</u>
<input type="radio"/> Early Full with workshop(s) \$125.00 - by 12/07/07 <input type="radio"/> Full - no workshop(s) \$125.00 - after 12/07/07 <hr/> <input type="radio"/> Early One-Day \$65.00 <input type="radio"/> One-Day \$75.00 by 12/07/07 after 12/07/07 <input type="radio"/> Tues. <input type="radio"/> Wed. <input type="radio"/> Thurs. TOTAL \$ _____	Tues., 8:00 a.m. <input type="radio"/> WS1-1 <input type="radio"/> WS1-2 <input type="radio"/> WS1-3 Wed., 2:00 p.m. <input type="radio"/> WS2-1 <input type="radio"/> WS2-2 <input type="radio"/> WS2-3 Thurs., 1:00 p.m. <input type="radio"/> WS3-1 <input type="radio"/> WS3-2 <input type="radio"/> WS3-3 TOTAL # _____ \$10.00/ea after 12/07/07 \$ _____	\$15.00 per ticket Beer included TOTAL # _____ \$ _____	<input type="radio"/> Check <input type="radio"/> MC <input type="radio"/> VISA <input type="radio"/> AmEx <input type="radio"/> Discover Card Number _____ - - - Expiration Date: _____ Signature _____ GRAND TOTAL \$ _____