



Association for Information Communications
Technology Professionals in Higher Education

SUMMER SEMINAR
JULY 18-21, 2010
EXHIBIT DATES: JULY 18-20
SAN FRANCISCO, CA

REGISTRATION DEADLINE: JULY 12th

EXHIBITOR REGISTRATION FORM

Three easy ways to register. Check one of the following:

1. <u>Exhibit Only</u>	2. <u>Social</u>	3. <u>Full</u>						
Cost: \$0.00 Includes: • Name badge • Admission to exhibit hall Extras: Monday Night Event <i>Hard Rock Cafe at Pier 39: Dinner</i> \$47.00 _____ Total Cost: _____ Payment Options: - Check One - ___ Payment Enclosed ___ Pay on-site ___ Credit Card Info Below	Cost: \$250.00 Includes: • Name badge • Admission to Ex. hall • Breakfast Mon. - Wed. • Lunch Mon. - Tues. • Coffee Breaks Mon. - Wed. • Monday Night Event Payment Options: - Check One - ___ Payment Enclosed ___ Pay On-site ___ Credit Card Info Below	Cost: <table border="1"> <tr> <td>Postmarked by 6/11</td> <td>After 6/11</td> </tr> <tr> <td>Corporate Affiliate ___\$459</td> <td>___\$509</td> </tr> <tr> <td>Non- member ___\$619</td> <td>___\$669</td> </tr> </table> Includes: • All Social registration benefits • Admission to all educational sessions • Course materials Payment Options: - Check One - ___ Payment Enclosed ___ PO Enclosed ___ Credit Card Info Below	Postmarked by 6/11	After 6/11	Corporate Affiliate ___\$459	___\$509	Non- member ___\$619	___\$669
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Corporate Affiliate ___\$459	___\$509							
Non- member ___\$619	___\$669							

NOTE: Each exhibiting company will receive 1 Admission to Session Pass (good for admission to educational sessions only) per 8x10 space, plus access to the online handouts. The Admission to Session Pass is transferrable among your staff and will only note your company's name. It will be provided onsite.

Signature _____ Date _____

Company _____

Name _____ Title _____

Address _____

City, State Zip _____

Telephone _____ Fax _____

E-mail Address _____ First Name for Badge _____

PLEASE NOTE: No one under the age of 16 is allowed in the exhibit hall or any ACUTA seminar function at any time (this includes set-up and tear down times).

• **Charge to:** ___ VISA ___ MasterCard ___ American Express ___ Discover
 Card # _____ Exp. Date _____ *Verification # _____

Name on Card _____ Signature _____

*Verification # is the 3-digit number on the front of AmEx cards, and the 4-digit number on the back signature line of MC & Visa cards

- **Refund Policy for Full Registrations:** (Cancellations may be mailed, faxed, or e-mailed)
Cancellations received by 7/2/10: Full refund less \$25 Administration Fee. All unpaid cancelled registrations will be assessed a \$25 Administration Fee.
Cancellations received 7/3/10-7/16/10: A credit will be issued (less \$25 Administration Fee), applicable toward registration for another ACUTA event within one year of issue.
Cancellations received after 7/16/10: No refund or credit.

• **Mail or FAX to:** 152 W. Zandale Dr., Suite 200, Lexington, KY 40503-2486
 Phone 859/278-3338 FAX 859/278-3268