

Registration Rates

Register for the Full Conference...

Early Bird Discount

(Extended to February 17, 2003)

Advance Discount

(received by April 28, 2003)

Onsite

Special Rates

U.S. Government

(Federal/state/local)

Higher Education

Student Rate

Corporate Team Rate

Corporate Code

Special team discounts for groups of 5 or more from the same organization.

Visit www.astd.org/ICEdelegation for details.

Guest

Guest Name _____

(Includes General Sessions, Social Events, and EXPO)

Or attend for a day or two

Please indicate days Sun. Mon. Tue. Wed. Thur.

Add This Amount Per Day

	ASTD Classic Member	Non-member
Daily	US \$405	US \$495
EXPO Only	US \$129	US \$129

Add an optional event

Preconference Workshops (Discount for conference attendees)

	Conference Attendees	Workshop Only
One-day	US \$395	US \$495
Two-day	US \$795	US \$995
1st choice _____		
2nd choice _____		
3rd choice _____		

HPI Certificate Program

(Please indicate which course)

HPI in the Workplace

Analyzing Human Performance

ASTD Training

Certificate Program

ROI Certificate Program

(*Conference registration is not included in price of certificate programs)

	ASTD Classic Member	Non-member
	US \$1,299*	US \$1,499*

HPI in the Workplace (in Spanish)

Selecting and Managing Interventions

ASTD Classic Member US \$995* **Non-member** US \$1,195*

ASTD Classic Member US \$850* **Non-member** US \$1,050*

Contact Information

ASTD Number _____

Mr. Ms. Mrs. Check here if this is a new address

Last Name _____

First Name _____

Title _____

Organization _____

Address _____

City/State/Province _____

Country/ZIP/Postal Code _____

Business Phone _____

Fax Number _____

Email Address _____

Preferred Name for Badge _____

Join Or Renew ASTD Now!

Source Code:

\$180* Renew my membership \$180*

International E-membership \$150**

* Pay the member registration rate for ASTD 2003 + \$180 for one year of ASTD Membership (Mexico and Canada pay \$205, International Pay \$250).

**Available to non-U.S. residents only, no additional charges apply.

Total: \$ _____

Register now and your confirmation will be mailed within three weeks. If you are from the U.S. or Canada and register by 4/23/03, you will receive your credentials in the mail prior to ASTD 2003. If cancellation should be necessary, written notification to ASTD is required by May 7. A \$50 cancellation fee will be applied. No refunds will be issued after May 7. Lost badge fee = \$50. Lost Expocard fee = \$5. Substitution fee = \$10. After May 7, 2003, please register in San Diego and pay the on-site fees.

Payment Instructions

Please check method of payment for total registration fees:

Visa MasterCard American Express Discover

Card Number _____ Expiration Date _____

Signature _____ Today's Date _____

Billing Address _____

City/State/Province _____

Country/ZIP/Postal Code _____

Purchase order number _____

Registration cannot be processed if P.O. is not enclosed.

Check enclosed - Registration cannot be processed if check is not enclosed.

Wire transfer - Registration cannot be processed until transfer is complete.

For instructions on paying by wire transfer visit www.astd.org/2003preview/ICE

Five Easy Ways To Register

Fax:	TDD:	Mail:
+1.301.694.5124	+1.703.683.4323	ASTD 2003
Phone:	Internet:	P.O. Box 3376,
1.800.628.2783	www.astd.org/2003preview/ICE	Frederick, MD 21705-3379
+1.703.683.8100		USA

Tell Us About Yourself

Please complete all the following questions to avoid delaying your registration.

How did you hear about ASTD 2003?

E-mail Ad Postcard Brochure Chapter Co-worker Website
 Other _____

Your purchasing authority: (check one only)

A. Have buying authority. B. Influence buying decisions. C. No influence.

Your organization level: (check one only)

A. Chief Executive Officer, President, Owner, Partner, Principal.
 B. Vice President or Executive Vice President. C. Training Department Director.
 D. Training Manager/Supervisor. E. Line Manager. F. Internal Consultant.
 G. Specialist, Individual Contributor. H. Independent Consultant.
 I. Other _____

Your employing organization's Industry: (check one only)

A. Manufacturing. B. Communications. C. Transportation. D. Utilities.
 E. Retail Trade. F. Healthcare. G. Finance, Insurance, Real Estate.
 H. Government. I. Military. J. Education. K. Information Services.
 L. Telecommunications. M. Training Supplier. N. Consulting Firm.
 O. Engineering Firm. P. Other _____

Size of training budget (excluding salaries) managed by your business unit: (check one only)

A. Under \$10,000. B. \$10,000-49,999. C. \$50,000-99,999.
 D. \$100,000-499,999. E. \$500,000-999,999. F. \$1,000,000 or greater.

Years in training and development: (check one only)

A. Less than 2 years. B. 2-5. C. 6-10. D. 11-20. E. 21 years or more.

Business Objective: (check all that apply)

A. Seeking to purchase products. B. Seeking to represent/distribute products.
 C. Interested in licensing agreements. D. Interested in joint ventures.

Please check here if you have a disability that requires auxiliary aids during the Conference. Attach a description of your needs.

