

# ASNT 2019 Annual Conference

November 18-21, 2019 • Las Vegas, NV



## Attendee Information

Payment must accompany registration form

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ M.I. \_\_\_\_\_

Company Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Home  Work

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip+4/Postal Code: \_\_\_\_\_

Country: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

ASNT# \_\_\_\_\_ Email: \_\_\_\_\_

- Check to allow distribution of your contact information to exhibitors  First ASNT Conference  
 Please check here if you have special accessibility needs.  Gluten free meals required  Vegetarian meals required

## Payment Information

Form of Payment  AmEx  MasterCard  Visa  Discover  Check  Funds Transfer Total \$ \_\_\_\_\_

Account Number \_\_\_\_\_ Exp. date: \_\_\_\_\_ CINT: \_\_\_\_\_

Name on Card (Please print) \_\_\_\_\_

Signature \_\_\_\_\_

Credit Card Billing Address (if different from above) \_\_\_\_\_

Billing Address Email \_\_\_\_\_

† **Card Identification Number.** For Visa/MasterCard/Discover: The 3-digit number is printed on the signature panel on the back of cards immediately following the account number. For American Express: 4-digit, non-embossed number printed above your account number on the face of your card. **Registration Policies:** Full conference registrations include access to program, exhibits, welcome reception, refreshment breaks and any scheduled meal events. One day registrations include access to program, exhibits, refreshment breaks and any scheduled meal events on the day of the registration. Payment must accompany form. Forms received without payment will not be processed. All registration fees must be drawn in U.S. funds through U.S. banks. **Cancellation Policy:** All cancellations must be confirmed in writing. Registrations cancelled by October 22 are subject to a \$100 service charge. No refunds will be made after October 22. "No-Shows" are not entitled to a refund.

Return the completed form (with payment) to: ASNT, 1711 Arlingate Lane, Columbus, OH USA 43228-0518; FAX: 614.274.6899; email: [shopasnt@asnt.org](mailto:shopasnt@asnt.org)

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## Registration

Advance Registration Deadline: October 22, 2019

	Through Oct 22		After Oct 22	
	<u>Member</u>	<u>Nonmember</u>	<u>Member</u>	
<b>Full Registration</b>	<input type="checkbox"/> \$625	<input type="checkbox"/> \$725	<input type="checkbox"/> \$725	<input type="checkbox"/> \$825
<b>One Day Registration</b>	<input type="checkbox"/> \$395	<input type="checkbox"/> \$495	<input type="checkbox"/> \$495	<input type="checkbox"/> \$595
	<b>Please select a day:</b> <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday			
<b>Exhibits Only</b>	<input type="checkbox"/> \$25 (per day; includes lunches; no access to technical sessions)			
	<b>Please select days:</b> <input type="checkbox"/> Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday			



### Special Registrations:

Full Registration-  
Speaker/Committee Chair  \$350  \$450  \$450  \$550

One Day Speaker  No Charge (only for day of presentation)  
**Please select a day:**  Tuesday  Wednesday  Thursday

Exhibits Only –  
Committee Member  No Charge **Committee Name** \_\_\_\_\_

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ASNT Student Member  No Charge (full time students only; must provide proof of enrollment; must be ASNT member)

ASNT Retired Member  No Charge (Retired membership is available to ASNT members who have paid full membership dues for at least 15 years, are at least 60 years old, retired and are not receiving remuneration of any kind for NDT activity)

**Subtotal \$** \_\_\_\_\_

### Optional Registrations

	Through Oct 22		After Oct 22	
	<u>Member</u>	<u>Nonmember</u>	<u>Member</u>	<u>Nonmember</u>
Short Course (each)	<input type="checkbox"/> \$300	<input type="checkbox"/> \$400	<input type="checkbox"/> \$400	<input type="checkbox"/> \$500
	<b>Please select Short Course(s)</b> <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> E			
Companion Program	<input type="checkbox"/> \$25			
	<b>Companion Name</b> _____			

Awards Banquet Tickets \_\_\_\_\_ x \$75 each

**Subtotal \$** \_\_\_\_\_

### Membership

ASNT New Membership –  1 year \$75 ASNT Membership Renewal  \$65 ASNT Student  \$15

(New Membership required for renewals with more than six months since expiration.)

**Subtotal \$** \_\_\_\_\_