

REGISTRATION FORM

SOLUTIONS TO COASTAL DISASTERS CONFERENCE 2008 Turtle Bay Resort – Oahu, Hawaii – April 13-16, 2008



Contact Information

*First Name _____ MI _____ *Last Name _____
 Credentials _____ Badge Nickname _____
 *Company/Organization/University _____
 *Street Address/PO Box _____
 *City _____ *State _____ *Postal Code _____ Country _____
 *Work Phone _____ Home Phone _____ Cell Phone _____
 Fax _____ *E-mail _____
 ASCE Member Number _____ If Coop Org Member, Name Organization _____
 * Indicates Required Information

EITHER fax OR mail to:
ASCE/Solutions to Coastal Disasters 2008
ASCE Conferences & Expositions
P.O. Box 79668
Baltimore, MD 21279-0668 USA
Fax: 703.295.6144
Phone: 703.295.6300 (International)
Phone: 800.548.2723 (US)
Questions: registrations@asce.org

Please answer these questions so we may serve you better:

- The organization I work for is: Private Government Education Military Other
- My position is: Partner/Principal Senior Manager Middle Manager Technical/Professional Manager Faculty Student Retiree
- How many previous ASCE Conferences have you attended, including this one? 0 1 2 3 or more
- My age group: Under 25 25-34 35-49 50-65 Over 65



- Check here if you require vegetarian or other special meal(s).
 Check here if you require special accommodations to fully participate.
 An ASCE representative will contact you to discuss your needs.

REGISTRATION:

Discounts available for (5) or more full registrations from same organization, registering & paying together. Fax forms with cover letter to 703.295.6144

FULL REGISTRATION

	EARLY-BIRD By Tuesday 2/12/08	ADVANCE By Tuesday 3/11/08	ON-SITE Wednesday, 3/12/08	Total
<input type="checkbox"/> Speaker/Author	\$595	\$675	\$695	_____
<input type="checkbox"/> Member	\$595	\$675	\$695	_____
<input type="checkbox"/> Cooperating Organization	\$595	\$675	\$695	_____
<input type="checkbox"/> Non-Member	\$675	\$775	\$795	_____
<input type="checkbox"/> Student (Copy of student ID required)	\$200	\$225	\$250	_____
<input type="checkbox"/> Guest	\$225	\$245	\$295	_____

KAMA'AINA RATE (Proof of Island Residency is required)

- Monday, April 14: \$295 (Luau NOT included) Tuesday, April 15: \$395 (Luau included) _____

WORKSHOPS: Sunday, April 13 (includes handouts and lunch)

	By 3/11/08	After 3/12/08	
<input type="checkbox"/> New Development in Coastal Designs	8:00 a.m. – 12:00 p.m.	\$210	\$260 _____
<input type="checkbox"/> Analysis Techniques for Evaluating Coastal Impacts	1:00 p.m. – 5:00 p.m.	\$210	\$260 _____
<input type="checkbox"/> Moving Towards Integration in Coastal Management	1:00 p.m. – 5:00 p.m.	\$210	\$260 _____
<input type="checkbox"/> BOTH Coastal Designs & Coastal Impacts	8:00 a.m. – 5:00 p.m.	\$350	\$400 _____
<input type="checkbox"/> BOTH Coastal Designs & Coastal Management	8:00 a.m. – 5:00 p.m.	\$350	\$400 _____
<input type="checkbox"/> Estimation & Prevention of Coastal Disasters Due to Tsunami Impacts	8:00 a.m. – 5:00 p.m.	\$350	\$400 _____

ADDITIONAL TICKETS: (*Please check your Registration Benefits before ordering)

- *Welcome Reception – Sunday, April 13 \$100 _____
 *Luau – Tuesday, April 15 \$125 _____
 Luau – Tuesday, April 15 (Age: 8 – 20) \$25 _____
 *Proceedings \$120 _____
 Tour – Wednesday, April 16: Walking/Hiking Tour to Kahuku Point \$25 _____
 Tour – Wednesday, April 16: Hawaii Coastal Geology, Hazards & Management \$100 _____
 Tour – Thursday, April 17: Big Island Tour \$150 _____

PAYMENT: To qualify for the Early-bird discount, payment must be postmarked by **February 12, 2008**. **REGISTRATIONS WILL NOT BE PROCESSED WITHOUT PAYMENT OR COPY OF PURCHASE ORDER.** Cancellations must be made in writing to ASCE by **March 11, 2008**, in order to receive a refund. A \$50 processing fee will be deducted from the registration fee. Additional Event Tickets will be fully refunded, if **cancelled in writing by March 11, 2008**.

GRAND TOTAL: _____

Full Registration \$ _____
 Workshops \$ _____
 Additional Tickets \$ _____
 Special Events \$ _____
GRAND TOTAL (pay this amount) \$ _____

Check
 must be issued in U.S. Dollars, drawn on U.S. banks and made payable to:
ASCE/Solutions to Coastal Disasters Conference 2008
ASCE Conferences & Expositions
P.O. Box 79668
Baltimore, MD 21279-0668, USA

Credit Card
 AMEX VISA MC DISC DINERS
 Card Number _____
 Expiration Date (MM/YY) _____
 Cardholder Name _____
 Signature _____
 Total to be Charged _____
 ASCE Dept. Code: _____

Purchase Order # _____
 (Provide copy of PO Form with your registration form.)