

14th Conference on Cold Regions Engineering

August 30-September 2, 2009 Duluth Entertainment Convention Center (DECC) Duluth, Minnesota

Please complete the registration form including signature and payment information. Use one registration form per person. Registrations will not be processed without full payment and registrant's full name.



Contact Information (*Indicates required information)

*First Name _____ MI _____ *Last Name _____
 Credentials _____ Badge Nickname _____
 Title _____
 *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 Cooperating Org Member**, Name Organization _____

**Includes Duluth Engineers Club, Engineers' Club of Northern Minnesota, Iron Mining Association of Minnesota, Minnesota Department of Transportation, Minnesota Society of Professional Engineers, Transportation Research Board (TRB), University of Minnesota Duluth, U.S. Army ERDC-CRREL.

Please answer these questions so that 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 Staff Faculty Student Retiree
- How many previous ASCE Conferences have you attended? 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.

Fax: (703) 295-6144

Phone: (800) 548-2723 (U.S.)

Phone: (703) 295-6300 (International)

Mail: ASCE/Cold Regions 2009

PO Box 79668

Baltimore, MD 21279-0668 USA

Register by June 18, 2009 and Save!

For complete Conference information and to register online, visit
<http://content.asce.org/conferences/coldregions2009>.

For additional information please contact Customer Service at
registrations@asce.org or call (800) 548-2723.

Full Registration

	EB Early Bird By 6/18/09	ADV Advance By 8/12/09	ONS Onsite After 8/12/09
ASCE Member	<input type="checkbox"/> \$475	<input type="checkbox"/> \$575	<input type="checkbox"/> \$625
Cooperating Organization Member	<input type="checkbox"/> \$475	<input type="checkbox"/> \$575	<input type="checkbox"/> \$625
Speaker	<input type="checkbox"/> \$475	<input type="checkbox"/> \$575	<input type="checkbox"/> \$625
Moderator	<input type="checkbox"/> \$475	<input type="checkbox"/> \$575	<input type="checkbox"/> \$625
Non-Member	<input type="checkbox"/> \$600	<input type="checkbox"/> \$700	<input type="checkbox"/> \$750
Spouse/Guest	<input type="checkbox"/> \$85	<input type="checkbox"/> \$100	<input type="checkbox"/> \$125
*Full-Time Student	<input type="checkbox"/> \$85	<input type="checkbox"/> \$100	<input type="checkbox"/> \$125

*Full-time Students must submit valid ID when registration form is submitted and onsite. Please fax a copy of your ID to ASCE Registrations at (703) 295-6144.

Daily Registration

Member/Speaker	<input type="checkbox"/> \$295	<input type="checkbox"/> \$345	<input type="checkbox"/> \$370
Non-Member	<input type="checkbox"/> \$325	<input type="checkbox"/> \$375	<input type="checkbox"/> \$400
Please select day of registration:	<input type="checkbox"/> Monday	<input type="checkbox"/> Tuesday	<input type="checkbox"/> Wednesday

Special Event

	EB/ADV/ONS	QTY	AMOUNT
Gala Banquet (Tuesday)	<input type="checkbox"/> \$50	_____	_____

Anyone wishing to attend the Gala Banquet must purchase a ticket

Additional Tickets

	EB/ADV/ONS	QTY	AMOUNT
<i>(These events are included with Full Registration and Monday/Tuesday Daily Registration)</i>			
Awards Luncheon (Monday)	<input type="checkbox"/> \$30	_____	_____
Ice Breaker Reception (Monday)	<input type="checkbox"/> \$40	_____	_____
Box Lunch (Tuesday)	<input type="checkbox"/> \$20	_____	_____

Technical Tours: Tuesday, September 1

Tours have been scheduled to allow registrants to participate in two tours, one at each scheduled time. A tour may be cancelled if there is insufficient participation. Please refer to Conference Web site for complete information: <http://content.asce.org/conferences/coldregions2009/tours.html>

1:15 - 3:15 PM

	EB/ADV/ONS	QTY	AMOUNT
Aerial Lift Bridge	<input type="checkbox"/> Complimentary. Check box to reserve your place.	_____	_____
UMD Eng. Bldg.	<input type="checkbox"/> \$25	_____	_____
Thompson Energy Ctr.	<input type="checkbox"/> \$25	_____	_____
Basalt Quarry	<input type="checkbox"/> \$25	_____	_____

3:30 - 5:30 PM

	EB/ADV/ONS	QTY	AMOUNT
Skyline Parkway	<input type="checkbox"/> \$25	_____	_____
UMD Eng. Bldg.	<input type="checkbox"/> \$25	_____	_____
Thompson Energy Ctr.	<input type="checkbox"/> \$25	_____	_____
Basalt Quarry	<input type="checkbox"/> \$25	_____	_____

PAYMENT: Full payment must accompany this registration form. NO REFUNDS granted for cancellations after August 12, 2009.

Full Registration	\$ _____
Daily Registration	\$ _____
Special Event	\$ _____
Additional Tickets	\$ _____
Technical Tours	\$ _____
GRAND TOTAL (pay this amount)	\$ _____

CHECK (Payable to ASCE/Cold Regions 2009. Checks must be issued in U.S. dollars, drawn on U.S. banks.) To pay registration fee by check, postmark your registration by the deadlines indicated above and mail to:

ASCE/Cold Regions 2009
PO Box 79668
Baltimore, MD 21279-0668 USA

CREDIT CARD
 AMEX VISA MC DISC DINERS

Card Number _____

Expiration Date (MM/YY) _____

Cardholder Name _____

Total to be Charged _____

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