

ASCE | EARTH & SPACE CONFERENCE MARCH 14 – 17, 2010

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. By submitting the Registration Form, the individual agrees to all registration policies on the Earth & Space 2010 Conference Web site. Final Paper Submission ID# and Upload Date can be found on the Earth& Space 2010 MIRA paper management system.

CONTACT INFORMATION

*First Name	MI	*Last Name		
Credentials	Badge Nickname			
*Company/Organization/University	Final Paper Submission ID#	Upload Date		
*Street Address/PO Box				
City	State	*Postal Code	Country	
*Work Phone	Home Phone	Cell Phone		
Fax	*Email			
ASCE Member Number	CoOp or Foundry Name Organization	State	*Postal Code	Country

Fax: **703-295-6144**

Phone: **800-548-2723 (US)**

Phone: **703-295-6300 (International)**

Mail: **ASCE Earth & Space 2010
PO Box 79668
Baltimore, MD 21279-0668 USA**

Join ASCE Today & Save!

Simply visit **www.asce.org/join**
or call **800-548-2723**
to request an application.

For more details please visit the
Earth & Space 2010 Web site.

Register by January 26, 2010 and Save!

For complete Conference
information and to register, visit:
**http://content.asce.org/
conferences/earthspace2010/
index.html**

For additional information, please
contact: **registrations@asce.org**
or dial: **800-548-2723**

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 Lacto-Vegetarian Octo-Vegetarian Vegan
- * Check here if you have allergies to the following: Peanuts Tree nuts Seafood Other_____
- * Check here if you require specific aids or services:
 Deaf or Hearing Impaired Blind or Visually Impaired Wheelchair Bound
 Other_____

FULL REGISTRATION

Registration Categories	EB EARLY-BIRD By 01/26/10	ADV ADVANCE By 03/01/10	ONS ONSITE After 03/01/10
Author Member	<input type="checkbox"/> \$ 495	<input type="checkbox"/> \$ 595	<input type="checkbox"/> \$ 695
Author Non-Member	<input type="checkbox"/> \$ 595	<input type="checkbox"/> \$ 695	<input type="checkbox"/> \$ 795
Student Author/Full*	<input type="checkbox"/> \$ 125	<input type="checkbox"/> \$ 150	<input type="checkbox"/> \$ 175
Student/Basic*	<input type="checkbox"/> \$ 115	<input type="checkbox"/> \$ 140	<input type="checkbox"/> \$ 165
Guest	<input type="checkbox"/> \$ 95	<input type="checkbox"/> \$ 115	<input type="checkbox"/> \$ 135
Speaker Member	<input type="checkbox"/> \$ 595	<input type="checkbox"/> \$ 695	<input type="checkbox"/> \$ 795
Speaker Non-Member	<input type="checkbox"/> \$ 695	<input type="checkbox"/> \$ 795	<input type="checkbox"/> \$ 895
Moderator Member	<input type="checkbox"/> \$ 595	<input type="checkbox"/> \$ 695	<input type="checkbox"/> \$ 795
Moderator Non-Member	<input type="checkbox"/> \$ 695	<input type="checkbox"/> \$ 795	<input type="checkbox"/> \$ 895

*Full-time Students must submit a valid ID when registration form is submitted

Please check if you plan to attend the Icebreaker Reception.

- Yes, I will attend No

DAILY REGISTRATION

Registration Categories	EB By 01/26/10	ADV By 03/01/10	ONS After 03/01/10
ASCE Member	<input type="checkbox"/> \$ 325	<input type="checkbox"/> \$ 425	<input type="checkbox"/> \$ 525
Foundry Member/Coop	<input type="checkbox"/> \$ 325	<input type="checkbox"/> \$ 425	<input type="checkbox"/> \$ 525
Non-Member	<input type="checkbox"/> \$ 400	<input type="checkbox"/> \$ 500	<input type="checkbox"/> \$ 600
Speaker Member	<input type="checkbox"/> \$ 325	<input type="checkbox"/> \$ 425	<input type="checkbox"/> \$ 525
Speaker Non-Member	<input type="checkbox"/> \$ 400	<input type="checkbox"/> \$ 500	<input type="checkbox"/> \$ 600
Moderator Member	<input type="checkbox"/> \$ 325	<input type="checkbox"/> \$ 425	<input type="checkbox"/> \$ 525
Moderator Non-Member	<input type="checkbox"/> \$ 400	<input type="checkbox"/> \$ 500	<input type="checkbox"/> \$ 600

Select Registration Day: MON. TUES. WED.

SPECIAL EVENTS – Additional Tickets Only

	EB	ADV	ONS	QTY
MONDAY, MARCH 15				
Ice Breaker Reception	<input type="checkbox"/> \$ 60	<input type="checkbox"/> \$ 75	<input type="checkbox"/> \$ 85	_____
TUESDAY, MARCH 16				
ASD Awards Banquet	<input type="checkbox"/> \$ 95	<input type="checkbox"/> \$ 105	<input type="checkbox"/> \$ 115	_____
THURSDAY, MARCH 18				
Tour: Lunar Analog Site	<input type="checkbox"/> \$ 100	<input type="checkbox"/> \$ 115	<input type="checkbox"/> \$ 125	_____
Proceedings	<input type="checkbox"/> \$ 125	<input type="checkbox"/> \$ 125	<input type="checkbox"/> \$ 140	_____

CANCELLATIONS/REFUNDS

Cancellations must be sent in writing or via email. A refund will be issued, minus a \$65 processing fee, if the cancellation notice is received by ASCE by **Tuesday, February 23, 2010**. No refunds will be made for cancellations received after the three-week deadline of **Tuesday, February 23, 2010**.

Send cancellations to
registrations@asce.org
or Fax to **703-295-6144**.

WHAT YOUR REGISTRATION INCLUDES

	Plenary Sessions	Concurrent Sessions	Ice Breaker Reception	Proceedings	ASD Awards Banquet
Full Registration	x	x	x	x	
Student/Full	x	x	x	x	
Student/Basic	x	x			
Guest	x		x		
Daily Registration					separate ticket required
Monday	x	x	x		
Tuesday	x	x			
Wednesday	x	x			

PAYMENT INFORMATION

Full payment **MUST** accompany all registration forms. Forms will not be processed without payment or copy of purchase order.

No REFUNDS granted for cancellations after February 23, 2010

Full Registration	\$ _____
Daily Registration	\$ _____
Tours	\$ _____
Special Events	\$ _____
Conference Activities	\$ _____
Post Conference Activities	\$ _____
Grand Total (pay this amount)	\$ _____

- CHECK** Payable to ASCE Earth & Space 2010. Checks must be issued in US dollars, drawn on US banks. You must include the attendee's name in the memo area of the check. To pay registration fee by check, postmark your registration by the deadlines indicated above to:
**ASCE Earth & Space 2010
PO Box 79668
Baltimore, MD 21279-0668 USA**
- Purchase Order #** _____
(Provide copy of PO Form with your Registration Form)

- CREDIT CARD**
 AMEX VISA MC DISC DINERS
- Card Number _____
Security Number (on back of card) _____
Expiration Date (MM/YY) _____
Cardholder Name _____
Total to be Charged _____