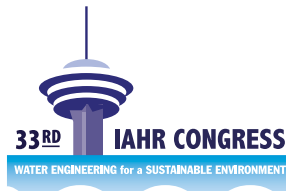


33RD IAHR CONGRESS / 19TH CANADIAN HYDROTECHNICAL CONFERENCE

REGISTRATION FORM

August 9-14, 2009 ♦ Hyatt Regency Vancouver ♦ Vancouver, BC, Canada

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. PLEASE PRINT OR TYPE ALL INFORMATION.



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 _____
 Fax _____ * Email _____
 In Case of Emergency, Congress week contact phone number (IMPORTANT) _____
 Member Number (IAHR, CSCE, ASCE, EWRI, or COPRI) _____

FOR COMPLETE CONGRESS INFORMATION, visit www.iahr2009.org

FOR CREDIT CARD PAYMENT Register Online: www.iahr2009.org

By Fax: 703-295-6144
 By Phone: 800-548-2723 (US)
 703-295-6300 (International)

FOR CHECK OR PURCHASE ORDER PAYMENT mail to:
 ASCE-EWRI (IAHR 2009)
 P.O. Box 79162
 Baltimore, MD 21279-0162 USA



- Check here if you require vegetarian or other special meal(s).
 Check here if you require special assistance during Congress.
 A Congress Management representative will contact you to discuss your needs.

REGISTER BY JUNE 30, 2009 AND SAVE!

REGISTRATION CATEGORIES

Full Registration

Includes technical and poster sessions, exhibits, breakfasts and refreshments, President's Reception & Dinner, Networking Reception, Congress Banquet, Student Dinner (for student registrants ONLY), and Proceedings.

To qualify for the Member rate you must be a member in good standing of one of these organizations: IAHR, CSCE, ASCE, EWRI, or COPRI.

	Advance By 6/30/09	Onsite 7/1/08 - 8/14/09
Member	<input type="checkbox"/> \$695US	<input type="checkbox"/> \$795US
Speaker	<input type="checkbox"/> \$695US	<input type="checkbox"/> \$795US
Non-Member **	<input type="checkbox"/> \$795US	<input type="checkbox"/> \$895US
Full-Time Student with Proceedings	<input type="checkbox"/> \$350US	<input type="checkbox"/> \$425US
Full-Time Student without Proceedings	<input type="checkbox"/> \$250US	<input type="checkbox"/> \$325US

Valid Student ID required at time of registration.

Spouse/Guest Registration

Guest Name: _____
 Includes breakfasts and refreshments, President's Reception & Dinner, Networking Reception, and Congress Banquet.

Spouse/Guest Rate \$310US \$360US

Daily Registration Monday Tuesday Wednesday Thursday

Includes technical and poster sessions, exhibits, breakfast and refreshments for day of registration only. May only choose one day; more than one day qualifies for a Full Registration.

Member	<input type="checkbox"/> \$495US	<input type="checkbox"/> \$545US
Speaker	<input type="checkbox"/> \$495US	<input type="checkbox"/> \$545US
Non-Member **	<input type="checkbox"/> \$545US	<input type="checkbox"/> \$595US

** Wish to be a member and pay the member rate? Make your selection below:

JOIN IAHR \$49US CSCE \$90US EWRI \$85US COPRI \$85US

Tour

Sunday, August 9

Deluxe Vancouver City Tour

REGISTRANT (SELF)	GUEST 1st Adult	GUEST 1st Child (4-11)
<input type="checkbox"/> \$ 69US	<input type="checkbox"/> \$ 69US	<input type="checkbox"/> \$ 47US
	GUEST 2nd Adult	GUEST 2nd Child (4-11)
	<input type="checkbox"/> \$ 69US	<input type="checkbox"/> \$ 47US

Technical Tours

Friday, August 14

Seymour-Capilano Water Filtration Plant
 Northwest Hydraulic Consultants'
 Hydraulic Modeling Laboratory
 Stave Falls and Ruskin Generating Stations
 Port Metro Vancouver

REGISTRANT (SELF)	GUEST #1	GUEST #2
<input type="checkbox"/> \$ 50US	<input type="checkbox"/> \$ 50US	<input type="checkbox"/> \$ 50US
<input type="checkbox"/> \$ 50US	<input type="checkbox"/> \$ 50US	<input type="checkbox"/> \$ 50US
<input type="checkbox"/> \$ 50US	<input type="checkbox"/> \$ 50US	<input type="checkbox"/> \$ 50US
<input type="checkbox"/> \$ 50US	<input type="checkbox"/> \$ 50US	<input type="checkbox"/> \$ 50US

For technical Guest Name # 1 _____

tours: Guest Name # 2 _____

Additional Tickets

Included for Full, Full-time Student & Spouse/Guest Registrants. ***

Monday, August 10

President's Reception & Dinner ***

\$100US _____

Tuesday, August 11

Networking Reception ***

\$ 50US _____

Wednesday, August 12

Student Dinner

\$ 25US _____

Included for Full-time Student Registrants.

Thursday, August 13

Congress Banquet ***

\$100US _____

Additional Proceedings

Full Registrants and Full-Time Student Registrants with Proceedings already receive 1 copy.

\$100US _____

For registration questions or additional information, please contact Customer Service at registrations@asce.org or call 800-548-2723.

PAYMENT: Full payment must accompany this registration form. NO REFUNDS granted for cancellations after July 7, 2009.

Full Registration	\$ _____ US	<input type="checkbox"/> PURCHASE ORDER # _____ (Provide copy of P.O. form with your registration form.)
Spouse/Guest Registration	\$ _____ US	<input type="checkbox"/> CHECK (Payable to ASCE-EWRI (IAHR 2009). Checks must be issued in US dollars, drawn on US banks.) To pay registration fee by check, postmark your registration (by the deadlines indicated above) to:
Daily Registration	\$ _____ US	<input type="checkbox"/> CREDIT CARD
New Membership	\$ _____ US	<input type="checkbox"/> AMEX <input type="checkbox"/> VISA <input type="checkbox"/> MC <input type="checkbox"/> DISC <input type="checkbox"/> DINERS
Tour	\$ _____ US	Card Number _____
Technical Tours	\$ _____ US	Expiration Date (MM/YY) _____
Additional Tickets	\$ _____ US	Cardholder Name _____
GRAND TOTAL (pay this amount)	\$ _____ US	Signature _____
		TOTAL TO BE CHARGED \$ _____ US

ASCE-EWRI (IAHR 2009)
 PO Box 79162
 Baltimore, MD 21279-0162 USA