

REGISTRATION FORM



Registration Preference

- Mail/Post to INMA,
P. O. Box 740186,
Dallas, Texas 75374, USA (along with payment)
- Fax/E-mail to INMA at
+1 214 373-9112 or events@inma.org
(along with payment information)

Delegate Registration

- Mr. Mrs. Ms. Dr. Other _____
- First Name _____
- Surname/Last Name _____
- Title/Function _____
- Company _____
- Address _____
- City _____
- State/Province (if applicable) _____
- Postal/Zip _____
- Country _____
- E-Mail _____
- Telephone _____
- Mobile _____

Registration Rates

	BY JAN 26	AFTER JAN 26
<input type="checkbox"/> INMA MEMBER	US\$595	US\$695
<input type="checkbox"/> NON-MEMBER	US\$1,390	US\$1,490

Pricing includes one year of INMA membership

**Contact INMA about group registrations of 10+ people (only for corporate members of INMA)*

Cancellation

Conference registrations may be cancelled until JANUARY 25, but are subject to a US\$95 processing fee. No refunds or credits are granted after JANUARY 26. Substitutions can be made at any time prior to JANUARY 26.

Payment Method

- Bank transfer in U.S. dollars to: INMA (Please e-mail events@inma.org for an invoice. *Bank charges and commissions to be paid by sender.*)
- I have enclosed a cheque/money order in the amount of US\$_____ payable in U.S. funds through a New York Exchange.

- Charge my fee to:   

Credit Card Number _____

Expiration _____ Security Code _____

Name on Credit Card _____

Signature _____