

**ASIS Annual Seminar and Exhibits
Speaker/Moderator Registration Form**

**September 15–18, 2008
Atlanta, Georgia**

Fax the completed form Attn: Keith Goins (703) 519-6298

PERSONAL INFORMATION

08SP

ASIS Member Number

First Name

Last Name

Name as it should Appear on Badge

Check designations

CPP

PSP

PCI

Company Name

Address

City

State

Zip code

Country

Business Phone

Business Fax

E-mail

I am staying at _____ (for emergency purposes)
Hotel Name

Speaker/Moderator Session(s) Time and Date: _____

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SEMINAR SPEAKER/MODERATOR REGISTRATION

I am speaking or moderating **one day** but want to attend the full conference:

	Early Bird Before 8/08/08	After 8/08/08	
Member	<input type="checkbox"/> \$592.50	<input type="checkbox"/> \$667.50	\$
Non-Member	<input type="checkbox"/> \$765	<input type="checkbox"/> \$840	\$
Government	<input type="checkbox"/> \$465	<input type="checkbox"/> \$540	\$

I am speaking and/ or moderating on **two separate days** but want to attend the full conference:

	Early Bird Before 8/08/08	After 8/08/08	
Member	<input type="checkbox"/> \$395	<input type="checkbox"/> \$445	\$
Non-Member	<input type="checkbox"/> \$510	<input type="checkbox"/> \$560	\$
Government	<input type="checkbox"/> \$310	<input type="checkbox"/> \$360	

SPOUSE REGISTRATION

Spouse Program Options:

	Early Bird Before 8/08/08	After 8/08/08	
Full Spouse Program	<input type="checkbox"/> \$320	<input type="checkbox"/> \$385	\$
One Day Spouse Program	<input type="checkbox"/> \$185/day	<input type="checkbox"/> \$250/day	\$

Indicate which day your spouse will participate

Mon Tues Weds Thurs

Spouse First Name _____ Last Name _____

ASIS FOUNDATION EVENT REGISTRATION

(All are non-refundable, tax deductible donations)

Foundation Dinner	<input type="checkbox"/> Table for 10 \$1,800	<input type="checkbox"/> Individual \$200 x _____	\$
Foundation Golf Tournament		Individual \$250 x _____	\$
Foundation Donation	<input type="checkbox"/> \$50	<input type="checkbox"/> \$25 <input type="checkbox"/> \$ _____	\$

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CERTIFICATION REVIEW COURSES, SEPTEMBER 12–13

	Full Course		Audit Only* (materials not included)		
CPP Review (meeting #925)	<input type="checkbox"/> \$700 Member	<input type="checkbox"/> \$900 Nonmember	<input type="checkbox"/> \$250 Member	<input type="checkbox"/> \$400 Nonmember	\$
Curso de Repaso para el examen de certificación para Profesionales de la Protección (CPP) (meeting #942)	<input type="checkbox"/> \$700 Member	<input type="checkbox"/> \$900 Nonmember	<input type="checkbox"/> \$250 Member	<input type="checkbox"/> \$400 Nonmember	\$
PCI Review (meeting #927)	<input type="checkbox"/> \$700 Member	<input type="checkbox"/> \$900 Nonmember			\$
PSP Review (meeting #926)	<input type="checkbox"/> \$700 member	<input type="checkbox"/> \$900 Nonmember			\$

* Only for attendees who have previously attended the CPP Review

OTHER PRE-SEMINAR PROGRAMS

	Member	Nonmember	
Program Name:	<input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$
Program Name:	<input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$

TOTAL AMOUNT	\$
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PAYMENT INFORMATION

Check Enclosed # _____

Visa MasterCard American Express Discover

Amount to Charge \$ _____

Name on Card _____

Signature _____

Account Number: _____ Expiration Date _____

PREPAYMENT REQUIRED IN U.S. DOLLARS/PAYABLE TO A U.S. BANK

Changes and cancellations: All cancellation requests must be in writing. To receive a full refund, you must notify ASIS Headquarters in writing on or before August 15, 2008. Cancellations received after August 15, 2008 are subject to a \$100 cancellation fee. No refunds are available for cancellations received on or after August 29, 2008 or for "no shows."

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QUICK SURVEY

Please respond to all questions.

My title is: (Which of the following best describes your position?) Select only one:

- 95 [] Active military/government personnel
- 89 [] Architect/engineer
- 94 [] Consultant
- 92 [] Executive/financial management (owner, partner, president, vice president, controller, or treasurer)
- 96 [] Law enforcement
- 93 [] Other management (director, manager, supervisor of safety/human resources/plant/facility/operations or other management personnel)
- 91 [] Security/loss prevention management (vice president, director, manager, or supervisor of security)
- 99 [] Other

My company's primary type of business at this location is (select one only):

- 60 [] Architectural/engineering firm
- 61 [] Communications (telephone, cable, media)
- 62 [] Distributor/warehousing
- 63 [] Educational institution (school, university, library, museum)
- 73 [] Energy (oil, gas, mining extraction)
- 64 [] Entertainment or sports facility
- 65 [] Financial services/insurance
- 66 [] Government/administrative agency
- 69 [] Healthcare
- 70 [] Hospitality/themed entertainment/casino
- 71 [] Industrial/manufacturing
- 85 [] Information technology
- 68 [] Law enforcement/corrections
- 76 [] Consulting
- 67 [] Military
- 74 [] Real estate (commercial/residential)
- 82 [] Research and development
- 75 [] Retail/food services
- 78 [] Security Dealer/installer
- 79 [] Security Investigations
- 77 [] Security Protective services
- 80 [] Transportation (air, rail, surface)
- 81 [] Utility (gas, electric, nuclear, water)
- 83 [] Other (specify)_____