

Registration Form

The Fifth US – Japan Symposium on Advancing Applications and Capabilities in NDE
16-20 June, 2014, Makena Beach & Golf Resort, Maui, Hawaii, USA



Attendee Information

Last Name: _____ First Name: _____ M.I. _____

Company Name: _____

Mailing Address: _____ Home Work

City: _____ State: _____ Zip+4/Postal Code: _____

Country: _____ Phone: _____ Fax: _____

ASNT# _____ Email: _____

Payment must accompany registration form Do not distribute my email address to exhibitors

Registration

Advance Registration Deadline: 16 May 2014

Membership

ASNT New Membership - 1 Year \$75* ASNT Membership Renewal \$65

*Become a new Member and receive member rates instantly. New Membership includes renewals with more than six months since expiration

Conference

Advance After 16 May

ASNT/JSNDI Member	<input type="checkbox"/> \$795	<input type="checkbox"/> \$895
Speaker	<input type="checkbox"/> \$795	<input type="checkbox"/> \$895
Non-member	<input type="checkbox"/> \$895	<input type="checkbox"/> \$995
Student Member	<input type="checkbox"/> \$595	<input type="checkbox"/> \$695

Yes, I will attend the Luau (included in registration fee)

Special Offerings

Additional Luau Ticket Adult \$100 # _____
 12 and Under \$50 # _____

Payment Information

Total Amount Paid \$

Form of Payment AmEx MasterCard Visa Discover Check Funds Transfer

Account Number _____ Exp date: _____

Name on Card (Print please) _____ CIN[†]: _____

Signature _____

Card Billing Address (if different from above) _____

Billing Email Address (if different from above) _____

[†]Credit Card Identification Number. For Visa/MasterCard/Discover: The three-digit value is printed on the signature panel on the back of cards immediately following the account number. For American Express: 4 digit, non-embossed number printed above your account number on the face of your card.

Registration Policies: Full conference includes ASNT Professional Program, Welcome Reception, and Luau. Student Rate requires an ASNT Student Membership. Membership status will be verified. Payment must accompany form. Forms received without payment will not be processed. All registration fees must be drawn in U.S. funds through U.S. banks. **Cancellation Policy:** All cancellations must be confirmed in writing. Cancellation requests must be received by **May 16, 2014** and are subject to a \$100 service charge. No refunds will be made after **May 16, 2014**. "No-Shows" (no notification of cancellation) are not entitled to a refund.

Mail or fax this completed form to: ASNT 1711 Arlingate Lane, Columbus, OH, 43228 FAX 614-274-6899