



ESMO 2003 Advance Registration Form



Complete this form and mail or fax to:

ESMO 2003 Registration
 9800 Metcalf Avenue • Overland Park, KS 66212-2216 USA
 Fax Number: (913) 967-1898 • Questions? Phone: (913) 967-1865

Last Name	First Name	Middle Initial
Affiliation/Company		Title
Street Address or P.O. Box		
City	State/Province	Zip/Postal Code
Country	Daytime Phone Number	Fax Number
Spouse/Companion Name (if registering)		Email Address

Other Information (Check all that apply)

<input type="checkbox"/> Utility	<input type="checkbox"/> Wholesaler/Distributor	<input type="checkbox"/> Panel Session Chair	<input type="checkbox"/> IEEE Member	Member No. _____
<input type="checkbox"/> Government	<input type="checkbox"/> Manufacturing	<input type="checkbox"/> PES Officer	<input type="checkbox"/> ASCE Member	_____
<input type="checkbox"/> Consulting	<input type="checkbox"/> Author	<input type="checkbox"/> Committee Officer	<input type="checkbox"/> ASME Member	_____
<input type="checkbox"/> University	<input type="checkbox"/> Panelist	<input type="checkbox"/> IEEE Officer		

Registration Fees (All costs listed in U.S. dollars)

Registration Status	Advance Registration Before March 4, 2003	Late/On Site Registration After March 4, 2003	Subtotal
IEEE/ASCE/ASME Member*	___ \$395	___ \$450	\$ _____
Non-IEEE/ASCE/ASME Member*	___ \$495	___ \$550	\$ _____
Spouse/Companion (Includes banquet only)	___ \$ 80	___ \$ 95	\$ _____
Other: <input type="checkbox"/> Life Member <input type="checkbox"/> Life Member's Spouse <input type="checkbox"/> Media <input type="checkbox"/> Exhibitor**			No Charge

*Includes access to all technical sessions, exhibits and demonstrations; Sunday night welcome reception, Wednesday night banquet and entertainment; continental breakfast and lunch on all four days; transportation between host hotels and outdoor field site; and a copy of conference proceedings.
 **Refer to Exhibitor/Demonstrator Brochure for information concerning complimentary registrations.

Spouse/Companion Activities (enter number of tickets desired)

			Subtotal
Monday, April 7	Lunch at Chalet Suzanne & Bok Tower Tour	___ x \$55	\$ _____
Tuesday, April 8	Kennedy Space Center*	___ x \$45	\$ _____
Wednesday, April 9	Scenic Winter Park/Park Avenue Shopping Tour*	___ x \$26	\$ _____

Round-trip transportation via deluxe motorcoach, uniformed tour guide, admission fee, lunch (except where noted with an asterisk), all taxes and gratuities are included with each activity.

*Lunch not included.

TOTAL REMITTANCE (U.S. Dollars) \$ _____

Method of Payment (U.S. dollars drawn on a U.S. bank)

___ Check Enclosed Payable to: ESMO 2003

Card #: _____ Exp. Date: _____ Signature: _____

Name as Appears on Card: _____ Card Type: _____

For hotel reservations, please call the Rosen Centre Hotel at 1-800-204-7234 Deadline for hotel reservations is March 4, 2003.

CANCELLATION POLICY: Cancellations received after March 4, 2003 will be subject to a US\$50 service charge. No cash refunds will be made at the conference. Refund requests for "no shows" must be made in writing and received no later than April 14, 2003. No refunds will be given for cancellations received after April 14, 2003.