



14th International Topical Meeting on Nuclear Applications of Accelerators (AccApp '20)
April 5-9, 2020 * Vienna, Austria

CONTACT INFORMATION

ANS ID _____

Prefix _____ First Name _____ Middle _____ Last Name _____ Designation (Ph.D, PE, etc) _____

First Name to Appear on Badge _____

Job Title _____ Company Affiliation _____

Street Address _____

City / State _____ Zip Code/Postal Code _____ Country _____

Telephone _____

Email (required) _____ Email (cc) _____

Please check all that apply: ADA (Specify) _____ Food Allergies _____
 Check here if a VISA/Invitation Letter is needed to attend this conference. Check here to be removed from distribution listing.
 Do you plan to attend the banquet? _____

| <i>*ANS Member pricing is for individual national members only; this does not include Local Section members or Organization Member.</i> | | Early Rate Paid by March 4, 2020 | Regular Fee Paid after March 4, 2020 |
|---|--|-------------------------------------|---|
| FULL MEETING REGISTRATION: Includes meeting publication and all F&B during conference | | | |
| ANS Member * | | \$ 950 | \$ 1,050 |
| Non-Member | | \$ 1,150 | \$ 1,250 |
| ANS Young Member* | | \$ 750 | \$ 850 |
| ANS Student Member* | | \$ 350 | \$ 450 |
| ANS Emeritus Member* | | \$ 350 | \$ 450 |
| ONE DAY REGISTRATION | | | |
| <i>Please select Day:</i> <input type="checkbox"/> Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday | | | |
| One Day Member Fee* | | \$ 550 | \$ 650 |
| One Day Non-Member Fee | | \$ 700 | \$ 800 |

(Please read inclusions in your registration fee. Tickets purchased that are included in the registration fee will not be refunded after the published cancellation dates.)

Sunday, April 5, 2020: Opening Reception # of tickets ____ @ \$65 each = \$ _____
 Tuesday, April 7, 2020: Poster Reception # of tickets ____ @ \$40 each = \$ _____
 Wednesday, April 8, 2020: Banquet # of tickets ____ @ \$90 each = \$ _____

GRAND TOTAL AND FORM OF PAYMENT \$ _____

Method of Payment Check American Express VISA MasterCard Discover Wire Transfer

Credit Card Number: _____ Expiration Date: _____ Security Code: _____

Cardholder's Signature: _____
Print Cardholder's Name if Different from Registrant

PLEASE REGISTER ONSITE AFTER March 4, 2020.

If paying by CHECK, make payable to ANS in U.S. Funds and Mail to ANS, 97781 Eagle Way, Chicago IL 60678-9770. When using Express Mail or an overnight service provider, do not use the Eagle Way address as it will be returned. Contact the ANS Registrar for overnight shipping information.

Send BANK FUNDS TRANSFER to Chase Bank, 10 S. Dearborn St., Chicago IL 60603. ANS Checking Acct #824941, Bank Routing Number (ABA) 021000021 * SWIFTCODE CHASUS33 * ACH Transfers (ABA) 071000013

Registration cancellations must be made in writing prior to March 4, 2020, in order to receive a refund minus processing fee. \$150 will be charged for members, non-members and one-day registration cancellations; student and emeritus registration will be charged \$50 to cancel.

No refunds after March 4, 2020 on registration fees or event tickets; however, you may send a substitute. Please contact ANS Registration at telephone number 708.579.8316 or email registrar@ans.org with any questions.

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