

ADVANCE CONFERENCE REGISTRATION FORM

2010 LWR Fuel Performance Meeting/Top Fuel/WRFPM

September 26-29, 2010 • Orlando, FL • Hyatt Regency Grand Cypress

FILL OUT COMPLETELY - PLEASE PRINT

ANS Member ID #: _____	First Name/Middle Initial: _____
Last Name: _____	Name to Appear on Badge: _____
Job Title: _____	Company/Affiliation: _____
Street Address: _____	☐ Company or ☐ Home
City/State/Zip: _____	Country: _____
ANS Members, please check if this is your: ☐ New Address (will change member record) or ☐ Meeting Registration Address Only	
Telephone: _____	Fax: _____
Email: _____	

MEETING REGISTRATION: 2010 LWR FUEL PERFORMANCE MEETING/TOP FUEL/WRFPM

	PREREGISTRATION FEES PAID BY SEPTEMBER 1, 2010		REGISTRATION FEES PAID AFTER SEPTEMBER 1, 2010	
	ANS NATIONAL MEMBER	NON-MEMBER	ANS NATIONAL MEMBER	NON-MEMBER
Speaker/Session Chair Meeting Registration <i>Includes one (1) ticket to the Opening Reception, Monday, Tuesday, Wednesday Luncheons, and a copy of the Meeting Proceedings on CD-Rom.</i>	[01] ☐ \$750	[02] ☐ \$900	[03] ☐ \$850	[04] ☐ \$1000
Meeting Attendee Registration <i>Includes one (1) ticket to the Opening Reception, Monday, Tuesday, Wednesday Luncheons, and a copy of the Meeting Proceedings on CD-Rom.</i>	[05] ☐ \$750	[06] ☐ \$900	[07] ☐ \$850	[08] ☐ \$1000

ADDITIONAL TICKETS (PLEASE NOTE THAT ONE TICKET IS INCLUDED WITH THE MEETING REGISTRATION)

SUNDAY, SEPTEMBER 26, 2010 Additional Ticket: Opening Reception	[11] ___ x \$75.00	\$ _____
MONDAY, SEPTEMBER 27, 2010 Additional Ticket: Monday Luncheon	[12] ___ x \$60.00	\$ _____
TUESDAY, SEPTEMBER 28, 2010 Additional Ticket: Tuesday Luncheon	[13] ___ x \$60.00	\$ _____
WEDNESDAY, SEPTEMBER 29, 2010 Additional Ticket: Wednesday Luncheon	[14] ___ x \$60.00	\$ _____

GRAND TOTAL AND FORM OF PAYMENT FOR MEETING REGISTRATION AND ADDITIONAL TICKETS

TOTAL OF MEETING REGISTRATION AND ADDITIONAL TICKETS	GRAND TOTAL: \$ _____
METHOD OF PAYMENT (CHECK ONE)	
☐ Check ☐ American Express ☐ VISA ☐ MasterCard ☐ Diners Club ☐ Wire Transfer	
Credit Card Number: _____	Expiration Date: _____
Cardholder's Signature: _____	
<i>Print cardholder's name if different than registrant</i>	

PLEASE REGISTER ON-SITE AFTER WEDNESDAY, SEPTEMBER 22, 2010

Make checks payable to ANS in U.S. funds and mail to ANS Registrar, 97781 Eagle Way, Chicago, IL 60678-9770. Credit card registrations may be faxed to 708/579-8314. Do not mail registrations which have been faxed. Send bank funds transfers to Chase Bank, 10 S. Dearborn St., Chicago, IL 60603. Bank Phone: 312-661-5000. Bank Fax: 312-661-6417. ANS Checking Account # 824941, Bank Routing Number (ABA) 021000021 SWIFTCODE (IBAN) CHASUS33.

PLEASE NOTE: When sending something to ANS with express mail or with an overnight service provider such as FedEx, UPS, DHL, etc., please use the following address only: American Nuclear Society, 555 North Kensington Avenue, La Grange Park, IL 60526, U.S.A. Do not use the Eagle Way address in Chicago for express and overnight mail as it will be returned to sender and this will result in a processing delay.

Registration cancellations must be made in writing prior to September 1st in order to receive a refund minus a \$75 processing fee. Meeting registrations and additional tickets canceled after September 1st will not be refunded; however, you may send a substitute. Please contact the ANS Registrar at telephone number: 708/579-8316 or email: registrar@ans.org with any questions.