

## One- & two-day registration form

Fill out this form, print it and mail it to join us April 15-17 in Philadelphia.

**THIS FORM IS INTERACTIVE:** You should be able to click on a field, type your information and print the completed form.

[Web link to forms tutorial](#)

### TAX ELIGIBILITY

IRS No.: 11-3390739

This training conference is tax-deductible to the full extent of the law. Please consult your tax preparer, accountant or your company's finance department.

### WHAT'S EXTRA

#### THURSDAY NIGHT RECEPTION

**(\$40):** An opening event atop the Loews Hotel with hors d'oeuvres.

#### FRIDAY NIGHT BANQUET (\$60):

Our signature evening event featuring our keynote speaker. Please be sure to select the meal you'd like to eat during the banquet. If you attend the banquet, please tell us in the comments field your banquet choice: chicken, pork loin, swordfish, vegetarian or kosher meal.

#### SATURDAY NIGHT PARTY (\$25):

A private get-together on the final night of the conference.

### MEMBERS' DISCOUNT

If you are not a current member, you can qualify for the members' discount by including a membership form. Details at [copydesk.org/membership](http://copydesk.org/membership).

### THE FINE PRINT

ACES reserves the right to change prices before conference and ACES has the final say on membership eligibility and prices. See [copydesk.org](http://copydesk.org) for full details and guidelines for full and associate memberships, your publication or company list your name on its check so that dues can be credited to your name. All amounts are in U.S. currency. Airfare, hotel accommodations and all incidentals not mentioned above are extra and not paid for by ACES.

### MAIL THIS FORM TO:

Carol DeMasters  
ACES Administrator  
7 Avenida Vista Grande  
Suite B7 #467  
Santa Fe, NM 87508

NAME				AS YOU WOULD LIKE IT TO APPEAR ON YOUR CONFERENCE BADGE		
PUBLICATION, COMPANY OR SCHOOL			TITLE OR POSITION			
MAILING ADDRESS			TO RECEIVE CONFERENCE MATERIALS		APARTMENT/SUITE/UNIT	
CITY			STATE	ZIP CODE		
PHONE NUMBER WITH AREA CODE			CELL PHONE NUMBER WITH AREA CODE			
E-MAIL ADDRESS						
MEMBERSHIP AFFILIATION			NOTE: SND MEMBERS QUALIFY FOR ACES RATE			
ACES full/associate		ACES student		SND member	Non-member	
<b>REGISTRATION RATES</b>						
CONFERENCE COST (IF ATTENDING TWO DAYS, MULTIPLY BY 2)				WHAT DAYS WILL YOU ATTEND?		
<b>POSTMARK DEADLINE</b>		<b>Mail-in In person</b>		THURS	FRI	SAT
		<b>March 19</b>		OTHER EVENTS (EXTRA)		
ACES members		\$80	\$100	THURSDAY RECEPTION (\$40)		
Non-members		\$135	\$165	FRIDAY BANQUET (\$60)		
Student members		\$40	\$55	SATURDAY PARTY (\$25)		
Student non-members		\$75	\$90			
IF YOU HAVE ANY DIETARY OR PHYSICAL NEEDS, PLEASE TELL US HOW WE CAN ACCOMMODATE YOU						
<b>TOTAL PAYMENT: WHAT YOU AUTHORIZE ACES TO CHARGE, BASED ON THE CHOICES MADE ABOVE</b>						
PAYMENT METHOD						
Check		Please make payable to ACES and include your name		Visa	MasterCard	American Express
CREDIT CARD NUMBER			SECURITY CODE		EXPIRATION DATE	
<b>YOUR CREDIT OR DEBIT CARD'S SECURITY CODE IS TYPICALLY A THREE-DIGIT NUMBER ON THE BACK OF THE CARD</b>						
CARD'S BILLING ADDRESS (if different from above)				NAME ON CARD (if different from above)		
CITY			STATE	ZIP CODE		
SIGNATURE				DATE		