

# REGISTRATION FORM

## 2007 AWPA Fall Technical Meetings

September 9-13, 2007

The Grove Hotel • Boise, Idaho USA

### I PLAN TO ATTEND THE FOLLOWING TECHNICAL SUBCOMMITTEE MEETINGS

- P-1     P-3     P-4     P-5     P-6     P-7/T-9     P-8  
 S-2     S-3     S-8  
 T-1     T-2     T-3     T-4     T-7     T8     T-10

### ATTENDEE INFORMATION

Name of Attendee \_\_\_\_\_ (as you want it to appear on badge)

Organization \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_ Zip/PC \_\_\_\_\_

Country \_\_\_\_\_ Email \_\_\_\_\_

Telephone \_\_\_\_\_ Facsimile \_\_\_\_\_

### REGISTRATION FEES (Circle One)

AWPA Member Rate    Non-Member Rate\*

EARLY REGISTRATION (ON OR BEFORE AUGUST 7)..... \$100 .....\$200

PRE-REGISTRATION (AUGUST 8-31)..... \$130 .....\$230

ON-SITE REGISTRATION (SEPTEMBER 9-13) ..... \$150 .....\$250

NOTE: NO REFUNDS WILL BE ISSUED FOR CANCELLATIONS REQUESTED AFTER AUGUST 7, 2007.

\* PLEASE CONSIDER JOINING AWPA TO REGISTER AT THE MEMBER RATE. [WWW.AWPA.COM/MEMBERSHIP/](http://WWW.AWPA.COM/MEMBERSHIP/)

### PAYMENT INFORMATION

A personal or company check in the amount of \$ \_\_\_\_\_ USD drawn on a U.S. bank.

Please charge \$ \_\_\_\_\_ to my credit card:     Visa     Master Card     Discover     American Express

Credit Card Number \_\_\_\_\_ Expiration Date \_\_\_\_\_ CVV No. \_\_\_\_\_

Cardholder Name \_\_\_\_\_ Signature \_\_\_\_\_

Cardholder's Billing Address \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_ Zip/PC \_\_\_\_\_

Country \_\_\_\_\_ Telephone \_\_\_\_\_

AMERICAN WOOD PROTECTION ASSOCIATION (formerly American Wood-Preservers' Association)

AWPA • P O BOX 361784 • BIRMINGHAM, AL 35236-1784

Phone: (205) 733-4077

Fax: (205) 733-4075

Email: [email@awpa.com](mailto:email@awpa.com)

Web: [www.awpa.com](http://www.awpa.com)