

2009 SIOP Conference Registration Form

Check if address below is a permanent change/correction.

Address: _____

E-mail: _____

Phone: (W) _____ (H) _____

Name as you want it to appear on your badge (Please print): _____

Employer/School Affiliation as you want it to appear on your badge: _____

The deadline for early registration is February 15, 2009.

Any registration forms received **after that date** will be processed, but **regular fees will apply**. Print your name as you wish it to appear on your Conference badge. Please check the appropriate boxes and type or print clearly.

Send form to SIOP, 440 East Poe Road, Suite 101, Bowling Green, OH 43402 or fax to 419-352-2645.

Cancellation Policy

Conference registrants who cancel their registration on or before **March 19, 2009**, will receive a refund of the conference registration fee, less a \$85 administrative fee.

Workshop fees (less a \$85.00 administrative charge) will be refunded through **March 4, 2009**. A 50% refund will be granted between March 5, 2009 and March 19, 2009.

No refunds will be granted after **March 19, 2009**. All refunds will be made based on the date when the written request is received at the Administrative Office.

Friday Seminar fees canceled by **March 19, 2009**, will be refunded less a \$25.00 administrative fee per seminar.

CONFERENCE REGISTRATION

AMOUNT

	Early Registration	Registration
<input type="checkbox"/> SIOP member	\$145	\$190
<input type="checkbox"/> SIOP Student Affiliate	\$100	\$125
<input type="checkbox"/> Nonmember	\$330	\$360

*You must be a Student Affiliate of SIOP to get the \$100 registration fee. Students who are not members must pay the \$330/\$360 nonmember registration fee.

\$ _____

Optional

WORKSHOPS—Please indicate your top six choices (in order of preference):

Workshop #	Workshop Title
1st	_____
2nd	_____
3rd	_____
4th	_____
5th	_____
6th	_____

I will accept any open session. (If your first 6 choices are unavailable and you do not check this option, you will not be charged for workshops and no workshop registration will be recorded. If paying by check, a refund will be issued.)

WORKSHOP FEES: (Membership in SIOP will be verified)

<input type="checkbox"/> SIOP Member/Student Affiliate	\$400
<input type="checkbox"/> Nonmember of SIOP	\$650

\$ _____

FRIDAY SEMINARS \$80 each Quantity: _____

Seminars 1 & 2 will be held from 8:30 to 11:30, and Seminars 3 & 4 will be from noon to 3.

AM Seminar 1 (Personality) or 2 (Health & Safety)

PM Seminar 3 (HR Metrics) or 4 (Social Network)

You may attend the AM Seminar, PM Seminar, or both.

\$ _____

CONFERENCE PLACEMENT CENTER: Anonymous Registration Yes No

<input type="checkbox"/> Student Affiliate: Internship/Job Seeker	\$40
<input type="checkbox"/> SIOP Member: Internship/Job Seeker	\$45
<input type="checkbox"/> Nonmember: Internship/Job Seeker	\$100
<input type="checkbox"/> Employer: Up to 4 positions	\$200

\$ _____

JUNIOR FACULTY CONSORTIUM \$75

\$ _____

School Library Makeover sponsored by Target \$20 Qty: _____

\$ _____

Creole Cooking School/Walking Postconference Tour \$50 Qty: _____

\$ _____

FUN RUN 5K RACE \$25 T-shirt included. Indicate size: S M L XL 2XL

\$ _____

SIOP 2009 T-SHIRT \$15 Qty: S ___ M ___ L ___ XL ___ 2XL ___

\$ _____

SIOpen GOLF TOURNAMENT \$85

\$ _____

This credit card belongs to myself my employer

Charge my credit card (Visa, MasterCard, or American Express)

_____ Account Number

_____ Expiration Date

_____ Signature

GRAND TOTAL

(U.S. Dollars, please)

\$ _____