EVENT #0520 ▸ TACOM LCMC APBI REGISTRATION FORM

MAIL TO: NATIONAL DEFENSE INDUSTRIAL ASSOCIATION ▸ 2111 WILSON BOULEVARD, SUITE 400 ▸ ARLINGTON, VA 22201
(703) 522-1820 ▸ (703) 522-1885 FAX ▸ WWW.NDIA.ORG/MEETINGS/0520

TACOM LCMC APBI ▸ HYATT REGENCY DEARBORN
DEARBORN, MICHIGAN ▸ OCTOBER 14-16, 2009

3 WAYS TO SIGN UP:

1. **Online with a credit card at www.ndia.org/meetings/0520**
2. **By fax with a credit card - Fax: (703) 522-1885**
3. **By mail with a check or credit card**

▷ Address Change Needed

NDIA Master ID/Membership #_____ Social Security #_____
(If known - hint: on mailing label above your name) *(Last 4 digits - optional)*

Prefix *(e.g. RADM, COL, Mr., Ms., Dr., etc.)* _____

Name: First _____ MI ____ Last _____

Military Affiliation _____ Nickname _____
(e.g. USMC, USA (Ret.) etc.) *(For meeting badges)*

Title _____

Organization _____

Street Address _____

Address *(Suite, PO Box, Mail Stop, Building, etc.)* _____

City _____ State _____ Zip _____ Country _____

Phone _____ Ext. _____ Fax _____

E-Mail _____

Signature* _____ Date _____

PREFERRED WAY TO RECEIVE INFORMATION
Conference Information ▷ Address above ▷ Alternate (Print address below) ▷ E-mail
Subscriptions ▷ Address above ▷ Alternate (Print address below)

Alternate Street Address _____

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* By your signature above, you consent to receive communications sent by or on behalf of NDIA, its Chapters, Divisions and affiliates (NTSA, AFEI, PSA, WID) through regular mail, e-mail, telephone or fax. NDIA, its Chapters, Divisions and affiliates do not sell data to vendors or other companies.

APBI REGISTRATION FEES	Regular *(Before 9/26)*	Late *(On or after 9/26)*
Government/Academia	$415	$455
Industry	$640	$700
Exhibitor/Breakout Speaker	$320	$320

All substituions and cancellations must be submitted in writing to hslabaugh@ndia.org no later than October 2, 2009.
There is a $75 cancellation fee for all refunds.
Substitutions welcome in lieu of cancellations!

PAYMENT OPTIONS

▷ **Check** (Payable to NDIA - Event #0520) ▷ **Government PO/Training Form #** _____

▷ **VISA** ▷ **MasterCard** ▷ **American Express** ▷ **Diners Club** ▷ **Cash**

If paying by credit card, you may return by fax to (703) 522-1885.

☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐ ☐☐/☐☐
Credit Card Number Exp. Date

Signature _____ Date _____

BY COMPLETING THE FOLLOWING, YOU HELP US UNDERSTAND WHO IS ATTENDING OUR EVENTS.

PRIMARY OCCUPATIONAL CLASSIFICATION. Check ONE.

- ▷ Defense Business/Industry
- ▷ R&D/Laboratories
- ▷ Army
- ▷ Navy
- ▷ Air Force
- ▷ Marine Corps
- ▷ Coast Guard
- ▷ DOD/MOD Civilian
- ▷ Government Civilian (Non-DOD/MOD)
- ▷ Trade/Professional Assn.
- ▷ Educator/Academia
- ▷ Professional Services
- ▷ Non-Defense Business
- ▷ Other _____

CURRENT JOB/TITLE/POSITION.
Check ONE.

- ▷ Senior Executive
- ▷ Executive
- ▷ Manager
- ▷ Engineer/Scientist
- ▷ Professor/Instructor/Librarian
- ▷ Ambassador/Attaché
- ▷ Legislator/Legislative Aide
- ▷ General/Admiral
- ▷ Colonel/Navy Captain
- ▷ Lieutenant Colonel/Commander/ Major/Lieutenant Commander
- ▷ Captain/Lieutenant/Ensign
- ▷ Enlisted Military
- ▷ Other _____

Year of birth _____
(optional)

QUESTIONS, CONTACT:

HOLLEY SLABAUGH
MEETING PLANNER

PHONE: (703) 247-2561

E-MAIL: hslabaugh@ndia.org

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