

1 DELEGATE INFORMATION

Mr Ms Dr Title _____ IAIA Member ID# _____ Date _____
 First name _____ Last name _____
 Organization _____
 Address _____ City _____
 State/Province _____ Postal Code _____ Country _____
 Phone + _____ Fax + _____ E-mail _____
 I plan to stay at _____ Hotel. (This information is used to estimate room blocks in upcoming years and will not be released.)

2 REGISTRATION FEES

I have already submitted an Early Bird Registration form

	by 28 February	after 28 February	
<input type="checkbox"/> IAIA member	\$450	\$550	\$ _____
<input type="checkbox"/> Non-member	\$530	\$630	\$ _____
<input type="checkbox"/> Renew my IAIA membership for another year			
<input type="checkbox"/> Student member (provide proof of current enrollment)	\$325	\$350	\$ _____
<input type="checkbox"/> Student non-member (provide proof of current enrollment)	\$375	\$400	\$ _____
Subtotal Registration Fee			\$ _____
<input type="checkbox"/> I have already paid an abstract processing fee			- \$60
Total Registration Fee			\$ _____

6 SOCIAL EVENTS

Delft Pottery 18 June # Persons ____ @ \$69 \$ _____
 Flower Tour 14 June # Persons ____ @ \$59 \$ _____
 Amsterdam Day 22 June # Persons ____ @ \$56 \$ _____

7 TREES FOR TRAVEL

I would like to participate! # Certificates ____ @ \$12.50 \$ _____

3 PRE-CONFERENCE TRAINING COURSES

	Choice: 1st 2nd		
<input type="checkbox"/> 1 Toward Better Practice in EIA	15-16 June	<input type="checkbox"/> <input type="checkbox"/>	\$400 \$ _____
<input type="checkbox"/> 2 Integrated Assessment of Trade	15-16 June	<input type="checkbox"/> <input type="checkbox"/>	\$400 \$ _____
<input type="checkbox"/> 3 Environmental Accounting	15-16 June	<input type="checkbox"/> <input type="checkbox"/>	\$400 \$ _____
<input type="checkbox"/> 4 WB Safeguard Policies	15-16 June	<input type="checkbox"/> <input type="checkbox"/>	\$400 \$ _____
<input type="checkbox"/> 5 Integrating Citizens' Values	15-16 June	<input type="checkbox"/> <input type="checkbox"/>	\$400 \$ _____
<input type="checkbox"/> 6 Integrating EIA, SEA, and SIA	15-16 June	<input type="checkbox"/> <input type="checkbox"/>	\$400 \$ _____
<input type="checkbox"/> 7 Training the HIA Trainer	15-16 June	<input type="checkbox"/> <input type="checkbox"/>	\$400 \$ _____
<input type="checkbox"/> 8 SEA: Key Elements	15-16 June	<input type="checkbox"/> <input type="checkbox"/>	\$400 \$ _____
<input type="checkbox"/> 9 Using Risk as an IA Framework	16 June	<input type="checkbox"/> <input type="checkbox"/>	\$200 \$ _____

8 PAYMENT INFORMATION

Total Registration Fee \$ _____
 Add Total of Activities Fees \$ _____
Total Amount Due \$ _____

Check or money order in US\$ drawn on a US bank enclosed.
 Invoice my company. Purchase order # _____
 Attn: _____

I will pay on-site with cash or traveler's check (US\$ or Euro).
 I am being sponsored.
 Sponsoring organization _____
 Contact person _____
 Contact person's phone # + _____
 Contact person's e-mail _____

4 TECHNICAL VISITS

	Choice: 1st 2nd		
<input type="checkbox"/> A Development IJburg	15 June	<input type="checkbox"/> <input type="checkbox"/>	# Persons ____ @ \$40 \$ _____
<input type="checkbox"/> B Schelde Estuary	16 June	<input type="checkbox"/> <input type="checkbox"/>	# Persons ____ @ \$40 \$ _____
<input type="checkbox"/> C Rotterdam Port	17 June	<input type="checkbox"/> <input type="checkbox"/>	# Persons ____ @ \$40 \$ _____
<input type="checkbox"/> D Sludge: Lake IJssel	17 June	<input type="checkbox"/> <input type="checkbox"/>	# Persons ____ @ \$40 \$ _____
<input type="checkbox"/> E Floriade	17 June	<input type="checkbox"/> <input type="checkbox"/>	# Persons ____ @ \$40 \$ _____
<input type="checkbox"/> F Dune Water Production	17 June	<input type="checkbox"/> <input type="checkbox"/>	# Persons ____ @ \$40 \$ _____

Charge to

 Expiration date ____/____/____ (mm/yy)
 Print name on card _____
 Authorized signature _____

5 SPECIAL CONFERENCE EVENTS

Opening Reception 17 June # Persons ____ @ no charge
 Conference Dinner 20 June # Persons (Delegates) ____ @ \$15 \$ _____
 # Persons (Guests) ____ @ \$40 \$ _____

9 SEND REGISTRATION AND PAYMENT TO

IAIA International Headquarters 1330 23rd Street South, Suite C Fargo, ND 58103 USA Fax +1 701 297 7917	Questions? +1 701 297 7908 info@iaia.org
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