



2008 IAATE Conference
March 5-8, 2008
Registration



PLEASE PRINT CLEARLY

Please use one form per person

Duplicate as needed

LAST NAME	FIRST NAME (For name badge)	AFFILIATION (For name badge)	
ADDRESS	CITY	STATE/PROVINCE/COUNTRY	ZIP
WORK PHONE	FAX	EMAIL	

Registration Fees

<i>Postmarked</i>	<i>Before 1/1/08</i>	<i>After 1/1/08</i>
Member	___ €115(\$155)	___ €136(\$185)
Non-Member	___ €136(\$185)	___ €147(\$200)
Spouse	___ €103(\$140)	___ €115(\$155)
Student*	___ €103(\$140)	___ €115(\$155)

*Proof of student status required with registration

Payment (No refunds after 1/31/08)

Registration fee	€(\$)	_____
Pre-conference trip	€26(\$35)	€(\$)
Evening Out	€26(\$35)	€(\$)
Workshop	€8(\$10)	€(\$)
Post-conference trip	€100(\$137)	€(\$)

Minimum 30 (Confirm by Feb 1st)

CD of Papers Presented €11(\$15) €(\$)

complimentary to presenters

Payment Total Enclosed € _____

\$ _____

I will attend: ___ Icebreaker ___ Banquet

Optional Events:

(Cost is NOT included with registration fee.)

Pre-Conference Trips (Confirm by Feb 1st)

(choose only one: Indicate 1st & 2nd choice)

- ___ Amsterdam: Heineken & V. Gogh Museums
€26(\$35)
- ___ Amsterdam: Artis Zoo & Ann Frank House
€26(\$35)
- ___ Boat tour & Falconiformes
€26(\$35)

Workshops: €8(\$10) each

(Indicate 1st & 2nd choice)

- ___ Raptor Equipment: Hoods & Gloves
- ___ Medical: Disease Recognition & Treatment
- ___ Public Speaking & Presentation Skills
- ___ Enrichment
- ___ Behavior & Training

Evening Out: Amsterdam (choose one event)

- ___ Boat tour €26(\$35)
- ___ Red light district €26(\$35)

Post-Conference Trip (Confirm by Jan 1st)

- ___ Zoo Tour €100(\$137)

Send this form with payment to:

Melissa Horton

7425 W. Hwy 44
Rapid City, SD 57702 USA

Questions: (605)341-2762

Fax registrations to: (866)272-9534

E mail registrations to:

treasurer@iaate.org

Make checks payable to: IAATE or

Please charge this to my credit card:

(___ MasterCard or ___ Visa)

Card Number _____

Expiration Date (MM/YY) _____

Security Code (3 far-right numbers on signature
space on back of card) _____

Name as it appears on card: (please print)

Signature: _____

International Members may use a credit card
or send a check or money order at the correct
exchange rate.

Reserve lunch for: (cost not included)

___ March 6 ___ March 7 ___ March 8

Will this be your first IAATE conference? ___ yes

Where/how did you hear about the conference?
