

Showcase 2008 Registration Form

North Alabama Chapter
AMERICAN SOCIETY OF TRAINING AND DEVELOPMENT
Post Office Box 1
Huntsville, AL 35804-0001
Telephone: 256-539-7117 (voice mail only)
Web Page: www.astdna.org

Date: August 26, 2008
Time: 7:30 a.m. to 4:30 p.m.
Location: Holiday Inn Research Park, 5903 University Drive, Huntsville, Alabama 35806
(Near Madison Square Mall)

Early Registration Prices

Applies to registrations received **before** August 1. Please check one of the following options:

- I am a member of the North Alabama Chapter, a nearby local chapter of ASTD,¹ a national member of ASTD, or a member of the North Alabama Chapter of the Society for Human Resource Management (SHRM).
- \$75 for the full-day program
 \$35 for lunch only
- I am **not** a member of one of these organizations.
- \$90 for the full-day program
 \$45 for lunch only

Late Registration Prices

Applies to registrations received **after** August 1. Please check one of the following options:

- I am a member of the North Alabama Chapter, a nearby local chapter of ASTD, a national member of ASTD, or a member of the North Alabama Chapter of the Society for Human Resource Management (SHRM).
- \$100 for the full-day program
 \$45 for lunch only
- I am **not** a member of one of these organizations.
- \$115 for the full-day program
 \$55 for lunch only

¹ Applies to Chattanooga, Birmingham, Nashville, Knoxville, Montgomery, Atlanta, and Memphis chapters.

Group Discounts Available

Group discount are available for five or more people registered at the same time. For more information, contact John Hightower at 256-713-2530 or JohnHightower@LFSP.com.

Guests Eligible for Membership Prices

ASTD or SHRM members may register guests at the membership prices. If you want to bring guests, please provide a list of names, addresses (including e-mail addresses), and telephone numbers on a separate sheet of paper.

How To Register and Payment Options

Please complete this form. Then mail the form and a check, purchase order, or credit-card authorization to ASTDNA, Post Office Box 1, Huntsville, AL 35804-0001. We accept only Visa and MasterCard. No cancellations or refunds, but participant substitutions are allowed.

Registration Information

Date: _____

Name: _____

Job Title: _____

Organization: _____

Billing Address for Credit Card: _____

City, State, ZIP Code: _____

Work Telephone: _____

Work E-mail: _____

Home Telephone: _____

Home E-mail: _____

Credit Card Authorization

I authorize the North Alabama Chapter of the American Society for Training and Development (ASTD), Inc., to charge my credit card for the following amount:

\$ _____

Credit card type (circle one): MasterCard Visa

Credit Card number: _____

Expiration date: _____

Signature: _____