

AFTA 2012 ANNUAL MEETING REGISTRATION FORM, May 16-19, 2012

NAME: _____ New Member? _____
 (as you want it to appear on your name badge-print clearly please!)

ADDRESS: _____

DAY PHONE: _____ FAX: _____ EMAIL: _____

FEES: (U.S. Funds Only)

1. **Registration** (All registrations include the Awards Banquet on May 19th and Special Event on May 17th)

NOTE: Members, ECMs, Student Members, and AFTA invited Non-Members can attend the AFTA Meeting May 16-17, AND the full open conference, May 17-19

	<u>Early</u>	<u>After</u> <u>4/16</u>	
Member	\$395	\$450	
Early Career Member	\$260	\$325	
Student (member or invited)	\$135	\$160	
Non-Member (invited by AFTA member for full meeting)	\$425	\$460	\$ _____

NOTE: Non-Members may attend the open conference, starting with the opening Keynote on May 17th at 4:00 and all events that follow.

Non-Member (attending three days: May 17-19)	\$375	\$430	\$ _____
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Spouse/Partner \$140
 Name of Partner: _____ \$ _____

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|--|------------------------------------|----------|
| 2. CE Credit | \$40 | \$ _____ |
| 3. Optional Meal for Women's Institute | \$30 | \$ _____ |
| 4. Optional Buffet Dinner for Men's Institute | \$30 | \$ _____ |
| 5. Optional Buffet Lunch for LGBTQ Networking | \$15 | \$ _____ |
| 6. Optional Buffet Lunch for Latina Women's Network | \$15 | \$ _____ |
| 7. Optional Buffet Lunch for People of Color Network | \$15 | \$ _____ |
| 8. Optional Buffet Lunch for Conversation on White Privilege | \$15 | \$ _____ |
| 9. Optional Continental Breakfast for ECMs and Students
(There is no fee, but you must sign up to attend) | \$0 | \$ _____ |
| 10. Extra Guest Ticket for Awards/Party, Saturday, May 19
(Each full registration includes one party ticket) | \$70 x _____
extra # of tickets | \$ _____ |
| 11. Special Event at the Maritime Museum, Thursday, May 17 | | |
| Members and Non-Members | \$75 | |
| Early Career Members | \$35 | |
| Students (member and non-member) | \$20 | \$ _____ |

12. **Sponsor** a guest from a marginalized community to attend (any amount) \$ _____

TOTAL AMOUNT ENCLOSED/TO BE CHARGED: \$ _____

PAYMENT METHOD: (U.S. Funds Only)

BY CHECK

BY CREDIT CARD: (**Visa/MasterCard ONLY**)

CANCELLATION DEADLINE

\$50 processing fee for cancellations before April 16, 2012, and **50%**

refund ONLY after April 16, 2012

Card # _____

Exp. Date: _____

Your Signature: _____

AFTA, 1608 20th Street NW, 4th Floor, Washington, DC 20009

Fax: (202) 483-8002; Phone: (202) 483-8001

Any dietary restrictions?

Any other special needs?
