
15.3 SAMPLE REGISTRATION FORM

[Conference Letterhead]

Registration Form

Your Chapter Number: _____ University: _____

Please print the names of the people who will be attending. These names will be used to prepare the name tags, so print them in the way that they should appear on the tags. Also, indicate the office or position held where appropriate. **Use additional sheets if necessary.** If you will have guests, include their names on the list with the title "Guest."

Please return this form with your check(s) to cover your registration fees as soon as possible, but no later than *[Date]*. Make your checks payable to *[IIE -Host University Name]* Chapter. AFTER THE NAME PLEASE INDICATE ANY STUDENT ATTENDEES THAT ARE GRADUATE STUDENTS.

<u>Name (as you want it to appear on the name tag)</u>	<u>Office Held/Title/Graduate Student</u>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Registration Fee \$ _____ Guest registration Fee \$ _____

Total number of student attendees _____ x [Attendance Fee] = \$ _____ enclosed.

Total number of guest attendees _____ x [Attendance Fee] = \$ _____ enclosed.

(Guests are spouses, alumni, etc.) [Attendance Fee can vary - see discussion]

Is your Faculty Advisor attending? _____ Yes _____ No If yes, please list name:

_____ (Faculty Advisors pay NO registration fee).

Who should we contact if we have questions about your registration?

Name _____

E-mail _____ Phone _____

Mail this form and your check(s) to:
[Title] [Full Name], Regional Meeting Chairperson
[Host Chapter Name]
[Address]
[City, State, ZIP]

Registration Form II

INDIVIDUAL REGISTRATION
[YEAR] Region # University IIE Conference

Please make all checks payable to [NAME] IIE Student Chapter

Name: _____

Address: _____

Phone: _____

E-mail: _____

University: _____

Class: _____

Chapter Correspondence: _____

Faculty Advisor: _____

Contact Information: _____

Are you a paper presenter? Yes No

Title of Presentation: _____
Please print clearly

Is your resume included? Yes No

____ \$[FEE] for IIE Members IIE membership # _____

____ \$[FEE] for non-IIE Members

WORKSHOPS

Please select your preference of workshops

List workshops

TOURS

Please rank your choice of tour with 1 being the highest and 4 being the lowest.

#__ XYZ Company

#__ ABC Company

#__ J. Smith Manufacturing

#__ 123 Technologies

Please submit registration form by [DATE] to [CONTACT NAME AND INFORMATION]