

# 2007 ISPE Annual Meeting - Networking Events Registration

Attach your completed Hotel Reservation Form (from main Annual Meeting Brochure) to this form and submit both to ISPE.

Please type or print clearly



ISPE ID Number \_\_\_\_\_

Education Delegate/Exhibitor \_\_\_\_\_  
FIRST NAME LAST NAME

## NETWORKING FEES

## QUANTITY

Spouse/Guest Program	\$385 each x _____	\$ _____
Monday Lunch	\$45 each x _____	\$ _____
Monday Night Reception - Travel to the Edge of Paradise	\$115 each x _____	\$ _____
Tuesday Membership Luncheon	\$55 each x _____	\$ _____
Tuesday Night Party - Roman Festival	\$195 each x _____	\$ _____
Wednesday Light Lunch	\$35 each x _____	\$ _____
Optional Event - ISPE Golf Tournament	\$110 each x _____	\$ _____
Optional Event - Hoover Dam Tour	\$75 each x _____	\$ _____

**TOTAL NETWORKING FEES** \$ \_\_\_\_\_

## SPOUSE/GUEST PROGRAM - \$385 per person

Spouse/Guest Name \_\_\_\_\_  
FIRST NAME LAST NAME

Additional Name \_\_\_\_\_  
FIRST NAME LAST NAME

### Fee includes the following; please check all in which you will participate:

- Sunday Spouse/Guest Welcome Tea
- Sunday Evening Welcome Reception
- Bally's Backstage Tour (Must be 16 years of age or older)
- Monday Night Reception - Travel to the Edge of Paradise at Margaritaville
- Trip to Spring Mountain Ranch
- Tuesday Night Party - Roman Festival

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## OPTIONAL EVENTS

### Wednesday, 7 November

- Option #1 - ISPE Golf Tournament at Angel Park Golf Club - Price: \$110 per person

Name \_\_\_\_\_  
FIRST NAME LAST NAME

Name \_\_\_\_\_  
FIRST NAME LAST NAME

### Optional Club Rental-Pay at the Course - Price: \$50 per rental

Men's  Right-handed Qty: \_\_\_\_\_ Women's  Right-handed Qty: \_\_\_\_\_  
 Left-handed Qty: \_\_\_\_\_  Left-handed Qty: \_\_\_\_\_

### Wednesday, 7 November

- Option #2 - Hoover Dam Tour - Price: \$75 per person

Name \_\_\_\_\_  
FIRST NAME LAST NAME

Name \_\_\_\_\_  
FIRST NAME LAST NAME

FOR OFFICE USE ONLY

ID # \_\_\_\_\_

TOTAL \_\_\_\_\_

DATE PAID \_\_\_\_\_

## PAYMENT METHOD

Registrations will not be accepted without payment or credit card information. Please contact ISPE regarding wire transfers.

- Check # \_\_\_\_\_ enclosed payable to ISPE (must be in US Dollars, drawn on a US bank) in the amount of \$ \_\_\_\_\_  
 Note: Make hotel deposit payable to Caesars Palace

- Bill My Credit Card - circle type:

VISA  MASTERCARD/EUROCARD  AMEX

CARD NUMBER \_\_\_\_\_

EXPIRATION DATE \_\_\_\_\_

NAME OF CARDHOLDER (AS IT APPEARS ON CARD) \_\_\_\_\_

CARDHOLDER SIGNATURE \_\_\_\_\_

- I will not be staying at Caesars Palace. I will be staying at the \_\_\_\_\_

Arrival Date: \_\_\_\_\_

Departure Date: \_\_\_\_\_

**Cancellations accepted in writing. Refunds will be given (less \$100 cancellation fee) if received before 12 October. No refunds thereafter.**

**Please send Annual Meeting registration and hotel reservation forms with payment to:**

ISPE Headquarters  
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 Tampa, FL 33607 USA  
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 www.ispe.org  
 FEI #59-2009272