



# Registration Form

## Attendee Information

Type or print clearly. Your badge will be printed with the information provided below:

First Name	Last Name	SMPS Member #	First Time Attendee
Badge Name			
Title	Company		
Address			
City	State/Prov.	Postal Code	
E-mail		Phone	If you require special services or dietary considerations, contact <a href="mailto:semra@smps.org">semra@smps.org</a>

## Virtual Conference Registration

	Member	Nonmember
Early-Bird Rate	\$599	\$799
Standard Rate	\$699	\$999

## Payment Summary

Payment must accompany registration form.

Registration Fee	Payment Type	Check	Visa	MC	Amex
Special Event Fees +	Credit Card #		Please add dashes or spaces: XXXX-XXXX-XXXX-XXXX		
Team Discount* -	Expiration Date		Security Code	Billing Zip	
Team Name	Name as it appears on Card				
Total	Cardholder Signature				