



Conference Registration Form

25 September – 27 September 2013 | The Westin Dragonara Resort | St. Julian's, Malta

If paying by check, complete registration form must be mailed with check enclosed. **Make checks payable to ATP.** You may also register online at <http://eatpconference.org/register/>

*FIRST NAME: _____ *LAST NAME: _____

*TITLE: _____ DEGREE INITIALS: _____

*COMPANY: _____

*ADDRESS 1: _____ ADDRESS 2: _____

*COUNTRY: _____ *CITY: _____

*STATE/PROVINCE: _____ *POSTAL CODE: _____

*TELEPHONE: () _____ FAX: () _____

*E-MAIL ADDRESS: _____

Delegate/Guest Registration

☐ €475 Early Bird Member

☐ * €600 Non-Member (After 21 June 2013)

☐ * €525 Early Bird Non-Member *

☐ €150 Guest

☐ €550 Member (After 21 June 2013)

Total Fee to be Charged:

Guest Full Name: _____ € _____

*Non-Members can be "sponsored" at the Member rate by a Regular or Associate ATP Member.

Name of ATP Member sponsoring me for the Member rate (this should be a member company name, not an individual): _____

How many previous E-ATP Conferences have you attended? ____ First Time Attendee ____ 1 ____ 2 ____ 3 ____ 4

Method of Payment

☐ VISA ☐ MASTERCARD ☐ AMEX ☐ CHECK# _____

CC# _____ Expiration Date: _____

Cardholder Name: _____

Signature: _____

Billing Address

Address 1: _____

Address 2: _____

Country: _____ City: _____

State/Province: _____ Postal Code: _____

Register by returning this form with payment to Designing Events:

Fax: +1-410-654-5335 **Mail:** E-ATP Conference Registration C/O Designing Events - 10811 Red Run Blvd., Suite 204, Owings Mills, MD 21117 USA

Questions? Contact Designing Events at ATP@DesigningEvents.com or by calling +1-410-654-5525 www.eatpconference.org