



08 ANNUAL CONFERENCE
OCTOBER 19-22 | ATLANTA, GA

Step 1: Basic Conference Registration

Name: _____ **Title:** _____

Name: _____ Title: _____

Name: _____ Title: _____

Name: _____ Title: _____

Name: _____ Title: _____

Organization: _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Phone: _____ **Email:** _____

Membership Status: IEDC Member Non-member Partner: _____

Promotion Code (if applicable): _____

Please note: basic registration price is if form postmarked/received by August 29, 2008.

	<u>Price</u>	X	<u># of Attendees</u>	=	<u>Total Price</u>
IEDC Member / Partner	\$715	X	_____	=	_____
Non-member	\$865	X	_____	=	_____

Step 2: Spouse/Guest Registration (optional)

Spouse/Guest \$220 X _____ = _____

Spouse/Guest Name: _____

City: _____ State: _____ Email: _____

Send form and payment to: IEDC, P.O. Box 759219, Baltimore, MD 21275-9219
Fax form and copy of purchase order to: (202) 223-4745

Step 3: Special Event Registration (optional)

<u>Tour</u>	<u>Price</u>	<u># of Tickets</u>	<u>Total Price</u>
Chattahoochee Hill Country and the Settlement of Serenbe	\$70	X _____	= _____
Kingwasong: Chinese Insourcing of Jobs to Coweta County	\$45	X _____	= _____
DeKalb & Fulton Counties PCIDs & Flyover Bridge	\$45	X _____	= _____
Technology Square on the Campus of Georgia Tech	\$45	X _____	= _____
World's Busiest Airport Behind the Scenes	\$45	X _____	= _____
The Villages of East Lake	\$45	X _____	= _____

Special Events

Golf Outing	\$110	X _____	= _____
Chairman's Reception	\$0	X _____	= _____
Preparing for the CEcD Exam	\$0	X _____	= _____
Recognition Dinner	\$100	X _____	= _____
Defining Issues Lunch with Roel Spee	\$55	X _____	= _____
Defining Issues Lunch with John G. Rice	\$55	X _____	= _____
International Cross Border Connection Event	\$0	X _____	= _____

TOTAL / AMOUNT ENCLOSED \$ _____
 (If registering a group of 4 or more, deduct 10% from total)

Step 4: Payment Information

Please select one:

Check Check Number: _____

Purchase Order PO Number: _____

Credit Card Type: _____ Credit Card Number: _____ Expiration Date: ___/___

Cardholder Name: _____ Signature: _____



Cancellation, Refund and No-Show Policy

- Substitutions will be accepted at any time.
- All registered attendees cancelling their registration, will be charged a \$95 processing fee, regardless of when the cancellation notice was received.
- Cancellations by phone are not accepted.
- **Cancellations must be received in writing by mail, fax or email** to Earnestine Jones, (202) 223-4745 or ejones@iedconline.org.
- Cancellations received on or before October 3, 2008, will be refunded or credited to a future IEDC Conference (less a \$95 processing fee). These transactions will be processed after the conference.
- **There will be no refunds or credits for cancellations received after October 3, 2008.**
- A registered attendee, who does not submit a written cancellation or attend the conference is considered a No-Show and is not eligible for a refund or credit.
- **A registered attendee, who does not submit a written cancellation or attend the conference, is still liable for any outstanding balances.**

