

REGISTRATION FORM

IC-NOCMAT 2019

July 24 - 26, 2019

Payment in full, by check, credit card, or money order, must accompany this form. This form may be duplicated for additional registrations. Please print in ink or type. Registration confirmation will be sent to the email address that you provide below. Include all information requested and return the completed form to Penn State **postmarked by June 30, 2019.**

Last name _____ First name _____ Middle initial _____

Date of birth (month/day/year) _____ ☐ Male ☐ Female

Email address _____

Penn State will use this email address to communicate with you about all programs for which you register. Your email address will also be used to communicate logistical information regarding the program.

Company or organization _____

Occupational title _____

Please check one ☐ Work address ☐ Home address

Mailing address (no. and street, or box no.) _____

City _____ State _____

ZIP code _____ Country _____

Phone number _____ Fax number _____

Enter your company/organization name as you would like it to appear on your name badge, or leave blank

Special dietary needs/accommodations (if none, leave blank) ☐ Vegetarian ☐ Vegan

☐ Gluten free ☐ Gluten free and vegan ☐ Other _____

Applicant's PSU ID no. _____ (if you do not have a PSU ID, you may supply your SSN*)

***Providing your Social Security Number is optional.** The Social Security number (SSN) you provide for enrollment purposes, or when requesting specific services, will be used by the University to verify your identity for official record keeping and reporting. If you choose not to supply your SSN, certain services — such as transcripts, enrollment verification, tax reporting, and financial aid — may not be available to you, and Penn State cannot guarantee a complete academic record for you. Your SSN will be stored in a central system and used only as a primary source to identify you within the Penn State system; the Penn State ID will be used as the primary identifier.

Conference Attendance – For planning purposes, indicate all day(s) of attendance.

☐ Wednesday, July 24

☐ Thursday, July 25

☐ Friday, July 26

CEU Certificate (no cost)

☐ I request a CEU certificate (e-mailed to me after the conference at no cost). Note: Continuing Education Units (CEUs) are based on a standard of 1 unit per 10 hours of classroom instruction. Upon completion of this program, each regular/professional participant may be awarded a certificate for the CEUs earned.

Registration Fees

Registration fees, listed in U\$D, will cover conference attendance, coffee/tea breaks, lunch each day, a welcome reception, and a conference pack. Purchase additional Event Tickets for accompanying persons.

Registration will include the cost of the pre-conference workshop on Wednesday, July 24, that will feature trainers from Arup (UK).

Late and on-site registration, after June 30, 2019, will include an additional U\$D 15.00 charge and can only be made online with a credit card.

Note: Student author/attendees must be a full-time student with university photo ID and evidence of current registration status required at on-site registration desk.

Fees for individuals from Developing Countries (refer to website for list of countries)

- ☐ U\$D 100.00 **Student Author** Early Registration by Tuesday, April 30, 2019
- ☐ U\$D 110.00 **Student Author** Regular Registration after Tuesday, April 30, 2019

- ☐ U\$D 110.00 **Student Attendee** Early Registration by Tuesday, April 30, 2019
- ☐ U\$D 120.00 **Student Attendee** Regular Registration after Tuesday, April 30, 2019

- ☐ U\$D 330.00 **Author (ABMTEC)** Early Registration by Tuesday, April 30, 2019
- ☐ U\$D 350.00 **Author (ABMTEC)** Regular Registration after Tuesday, April 30, 2019

- ☐ U\$D 350.00 **Author (Non-member)** Early Registration by Tuesday, April 30, 2019
- ☐ U\$D 380.00 **Author (Non-member)** Regular Registration after Tuesday, April 30, 2019

- ☐ U\$D 380.00 **Faculty Attendee** Early Registration by Tuesday, April 30, 2019
- ☐ U\$D 400.00 **Faculty Attendee** Regular Registration after Tuesday, April 30, 2019

- ☐ U\$D 400.00 **Industry Attendee** Early Registration by Tuesday, April 30, 2019
- ☐ U\$D 420.00 **Industry Attendee** Regular Registration after Tuesday, April 30, 2019

Fees for individuals from Other Countries (refer to website for list of other countries)

- ☐ U\$D 150.00 **Student Author** Early Registration by Tuesday, April 30, 2019
- ☐ U\$D 170.00 **Student Author** Regular Registration after Tuesday, April 30, 2019

- ☐ U\$D 170.00 **Student Attendee** Early Registration, by Tuesday, April 30, 2019
- ☐ U\$D 190.00 **Student Attendee** Regular Registration after Tuesday, April 30, 2019

- ☐ U\$D 350.00 **Author (ABMTEC)** Early Registration by Tuesday, April 30, 2019
- ☐ U\$D 380.00 **Author (ABMTEC)** Regular Registration after Tuesday, April 30, 2019

- ☐ U\$D 380.00 **Author (Non-member)** Early Registration by Tuesday, April 30, 2019
- ☐ U\$D 400.00 **Author (Non-member)** Regular Registration after Tuesday, April 30, 2019

- ☐ U\$D 400.00 **Faculty Attendee** Early Registration by Tuesday, April 30, 2019
- ☐ U\$D 420.00 **Faculty Attendee** Regular Registration after Tuesday, April 30, 2019

- ☐ U\$D 430.00 **Industry Attendee** Early Registration by Tuesday, April 30, 2019
- ☐ U\$D 440.00 **Industry Attendee** Regular Registration after Tuesday, April 30, 2019

Conference Events for Accompanying Persons

- ☐ U\$D 20.00 Companion cocktail/reception event on July 24, 2019 x # of persons = _____.
- ☐ U\$D 40.00 Companion Dinner (Banquet) on July 26, 2019 x # of persons = _____.

Pre-conference Workshop Certificate

- ☐ U\$D 50.00 for the July 24 pre-conference workshop Certificate of Attendance

\$_____ Total Payment

Payment

Your payment, in full, must accompany your registration form. The Pennsylvania State University's federal ID number is 24-6000376.

- ☐ Enclosed is a check or money order for the amount indicated, signed and payable to The Pennsylvania State University.
- ☐ Enclosed is a purchase order (made payable to The Pennsylvania State University) or letter of authorization from my employer or sponsoring organization.
- ☐ IDCC — Penn State employees only to &NCR. Document number _____
- ☐ Personal credit card
- ☐ Business credit card
- ☐ Credit card: May be mailed or faxed.

☐ American Express

☐ MasterCard

☐ Visa

☐ Discover

Cardholder's name (please print) _____

Cardholder's signature _____

Cardholder's phone number _____

Credit card billing address (no. and street, or box no.) _____

City _____ State _____

ZIP code _____ Country _____

Credit card number _____ Exp. date (month/year) _____

(Credit card charges cannot be processed without signature and expiration date.)

Fax or mail registration pages to:

Noncredit Registration Office

The Pennsylvania State University

Box 410

State College, PA 16804-0410

Phone: 814-867-4973

Fax: 814-863-2765