

Registration Form

Mail to: Interface 2008
PO Box 7460
Fairfax Station, VA 22039

Name _____
___ I want to join Interface NOW \$35

Job Affiliation _____

Job Address _____

* _____

Phone: _____

Email address: _____

Conference Fees

Member (Interface) \$300 / \$350

Member (Cooperating) \$350 / \$400

Non-Member \$415 / \$465

Student \$125 / \$150

Single Day \$150 / \$175
(no banquet ticket)

Guest Banquet
Tickets @ \$50 / \$65 each \$ _____

Total (Check Enclosed) \$ _____

Check payable to Interface 2008

No refunds after 30 March 2008

Credit Card

Name as it appears on credit card:

* _____

Billing Address _____

* _____

Card # _____

Card Type _____ Exp.Date _____

Three digit security code _____

Returned checks or denied credit cards will
be rebilled with \$30 surcharge.