



Attendee contact information

AIGA member account ID _____
First name _____
Last name _____
Title _____
Company (or school) _____
Address _____

City _____
State _____ Zip _____
Country _____
Daytime phone _____
Fax _____
Email _____
Chapter affiliation _____

AIGA membership application

I would like to join in the following category:

- Professional \$295:** An individual who has practiced or taught graphic design for more than two years, or who practices or teaches in an allied field
- Associate \$210:** An individual who has practiced graphic design for fewer than four years
- Student \$75:** A full-time student who presents a copy of a dated bursar's receipt from an accredited college or university (proof of full-time status required)
- Group membership \$245 each:** Firms who wish to purchase professional memberships for three or more employees should consider a group membership at the discounted rate of \$730 for the first three members and \$245 for each additional member. Download an application at www.aiga.org/join.

Conference registration fees and policies

Registration rates (register online and save \$25; visit <http://www.response-abilityconference.com/>)

- Conference fee \$300
- AIGA member rate (\$50 savings!) \$250
- AIGA student member rate \$100
(only 25 AIGA student member seats available)

Cancellation fees: There will be a \$20 fee for cancellations made prior to March 15, 2010. AIGA will refund 50 percent of conference fees paid for cancellations made between March 15 and April 15, 2010. No refunds will be available after April 15, 2010.

I need the following special services because of a disability: _____

Payment information

- Check enclosed, payable to AIGA
- Visa MasterCard American Express

Card no. _____
Expiration date _____
Signature _____

Conference registration fee	\$ _____
Membership fee	\$ _____
Total	\$ _____

Return this form with your check or credit card information to:

AIGA Conference Registration
164 Fifth Avenue, New York, NY 10010
Fax: 212 807 1799

If you are paying by check, please do not fax this form in advance. Full payment must accompany this form in order to be processed. If you have any questions, please call 212 710 3145 or email aiga_registrar@aiga.org.