

**ASIS Annual Seminar and Exhibits  
Speaker/Moderator Registration Form**

**September 24–7, 2007  
Las Vegas, Nevada**

**Fax the completed form Attn: Tracey Hickson (703) 519-6298**

**PERSONAL INFORMATION**

**07SP**

\_\_\_\_\_  
ASIS Member Number

\_\_\_\_\_  
First Name

\_\_\_\_\_  
Last Name

\_\_\_\_\_  
Name as it should Appear on Badge

Check designations

CPP

PSP

PCI

\_\_\_\_\_  
Company Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip code

\_\_\_\_\_  
Country

\_\_\_\_\_  
Business Phone

\_\_\_\_\_  
Business Fax

\_\_\_\_\_  
E-mail

I am staying at \_\_\_\_\_ (for emergency purposes)  
Hotel Name

Speaker/Moderator Session(s) Time and Date: \_\_\_\_\_

## ASIS Annual Seminar and Exhibits Speaker/Moderator Registration Form

### SEMINAR SPEAKER/MODERATOR REGISTRATION

I am speaking or moderating **one day** but want to attend the full conference:

	Early Bird Before 8/22/2007	After 8/22/2007	
<b>Member</b>	<input type="checkbox"/> \$577.50	<input type="checkbox"/> \$652.50	\$
<b>Non-Member</b>	<input type="checkbox"/> \$735.00	<input type="checkbox"/> \$810.00	\$
<b>Government</b>	<input type="checkbox"/> \$450.00	<input type="checkbox"/> \$525.00	\$

I am speaking and/ or moderating on **two separate days** but want to attend the full conference:

	Early Bird Before 8/22/2007	After 8/22/2007	
<b>Member</b>	<input type="checkbox"/> \$385.00	<input type="checkbox"/> \$435.00	\$
<b>Non-Member</b>	<input type="checkbox"/> \$490.00	<input type="checkbox"/> \$540.00	\$
<b>Government</b>	<input type="checkbox"/> \$300.00	<input type="checkbox"/> \$350.00	

### SPOUSE REGISTRATION

Spouse Program Options:

	Early Bird Before 8/22/2007	After 8/22/2007	
<b>Full Spouse Program</b>	<input type="checkbox"/> \$310	<input type="checkbox"/> \$410	\$
<b>One Day Spouse Program</b>	<input type="checkbox"/> \$180	<input type="checkbox"/> \$280	\$

Indicate which day your spouse will participate

Mon                       Tues                       Weds                       Thurs

Spouse First Name \_\_\_\_\_ Last Name \_\_\_\_\_

### ASIS FOUNDATION EVENT REGISTRATION

(All are non-refundable, tax deductible donations)

<b>Foundation Dinner</b>	<input type="checkbox"/> Table for 10 \$1,800	<input type="checkbox"/> Individual \$200 x _____	\$
<b>Foundation Golf Tournament</b>		Individual \$250 x _____	\$
<b>Foundation Pistol Shooting Tournament</b>	Team of 4 \$400	Individual \$100 x _____	\$
<b>Foundation Donation</b>	<input type="checkbox"/> \$50	<input type="checkbox"/> \$25 <input type="checkbox"/> \$ _____	\$

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**CERTIFICATION REVIEW COURSES, SEPTEMBER 22-23**

	Full Course		Audit Only* (materials not included)		
<b>CPP Review (meeting #806)</b>	<input type="checkbox"/> \$695 Member	<input type="checkbox"/> \$895 Nonmember	<input type="checkbox"/> \$250 Member	<input type="checkbox"/> \$400 Nonmember	\$
<b>Curso de Repaso para el examen de certificación para Profesionales de la Protección (CPP) (meeting #867)</b>	<input type="checkbox"/> \$695 Member	<input type="checkbox"/> \$895 Nonmember	<input type="checkbox"/> \$250 Member	<input type="checkbox"/> \$400 Nonmember	\$
<b>PCI Review (meeting #807)</b>	<input type="checkbox"/> \$695 Member	<input type="checkbox"/> \$895 Nonmember			\$
<b>PSP Review (meeting #805)</b>	<input type="checkbox"/> \$695 Member	<input type="checkbox"/> \$895 Nonmember			\$

\* Only for attendees who have previously attended the CPP Review

**OTHER PRE-SEMINAR PROGRAMS**

	Member	Nonmember	
<b>Program Name:</b>	<input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$
<b>Program Name:</b>	<input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	\$

<b>TOTAL AMOUNT</b>	<b>\$</b>
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**PAYMENT INFORMATION**

Check Enclosed # \_\_\_\_\_

Visa    MasterCard    American Express    Discover

Amount to Charge \$ \_\_\_\_\_

Name on Card \_\_\_\_\_

Signature \_\_\_\_\_

Account Number: \_\_\_\_\_      Expiration Date \_\_\_\_\_

**PREPAYMENT REQUIRED IN U.S. DOLLARS/PAYABLE TO A U.S. BANK**

**Cancellation Policy:** All cancellation requests must be in writing. To receive a full refund, you must notify ASIS Headquarters in writing on or before August 24, 2007. Cancellations received after August 24, 2007 are subject to a \$100 cancellation fee. No refunds are available for cancellations received on or after September 7, 2007 or for "no shows."

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## QUICK SURVEY

Please respond to all questions.

My title is: (Which of the following best describes your position?) Select only one:

- 95 [ ] Active military/government personnel
- 89 [ ] Architect/engineer
- 94 [ ] Consultant
- 92 [ ] Executive/financial management (owner, partner, president, vice president, controller, or treasurer)
- 96 [ ] Law enforcement
- 93 [ ] Other management (director, manager, supervisor of safety/human resources/plant/facility/operations or other management personnel)
- 91 [ ] Security/loss prevention management (vice president, director, manager, or supervisor of security)
- 99 [ ] Other

My company's primary type of business at this location is (select one only):

- 60 [ ] Architectural/engineering firm
- 61 [ ] Communications (telephone, cable, media)
- 62 [ ] Distributor/warehousing
- 63 [ ] Educational institution (school, university, library, museum)
- 73 [ ] Energy (oil, gas, mining extraction)
- 64 [ ] Entertainment or sports facility
- 65 [ ] Financial services/insurance
- 66 [ ] Government/administrative agency
- 69 [ ] Healthcare
- 70 [ ] Hospitality/themed entertainment/casino
- 71 [ ] Industrial/manufacturing
- 85 [ ] Information technology
- 68 [ ] Law enforcement/corrections
- 76 [ ] Consulting
- 67 [ ] Military
- 74 [ ] Real estate (commercial/residential)
- 82 [ ] Research and development
- 75 [ ] Retail/food services
- 78 [ ] Security Dealer/installer
- 79 [ ] Security Investigations
- 77 [ ] Security Protective services
- 80 [ ] Transportation (air, rail, surface)
- 81 [ ] Utility (gas, electric, nuclear, water)
- 83 [ ] Other (specify)\_\_\_\_\_