



The University of Texas at Austin, TX
Class 7—January 16-21, 2011

Attendee Information

Name _____ Badge _____
Company name _____ Title _____
Street Address _____
City _____ State _____ Zip _____
E-mail _____ Phone _____ Fax _____

E-mail address to send receipt acknowledgement of registration form _____

Registration Fees

Member	\$2,100
Non Member	\$3,100

Class Cancellation & Refund Policy

If it becomes necessary to cancel your participation, please send written notification to MCAA as soon as possible. Cancellations occurring 30 days or more prior to the start of class will receive a 90% refund. Substitutions are always accepted.

Registrations will be processed on a first come, first served basis. Class space is limited to enhance group interaction. The registration fee is due at the time of registration. Registrations cannot be processed until payment is received.

Check (payable to MCAA) MasterCard VISA American Express
Account Number _____ Expiration _____
Print Cardholder Name _____ Billing Zip Code _____
Cardholder Signature _____

Hotel Reservations - AT&T Executive Education and Conference Center (Class begins Sunday at 1:00 PM, and ends Friday at Noon)	Room Type	King Bed	Dbl/Dbl Bed	Room Rate
	Standard Room			\$159

Arrival Date _____ Departure Date _____
Total Number of People in Room _____ Name of any others sharing room _____

Do you have any special hotel requirements? _____

Please contact Beth Miller at 1-800-556-3653 if you require special accommodations to fully participate in this event.

Reservations at the AT&T Executive Education and Conference Center

Reservations will be made for you at the AT&T Executive Education and Conference Center. Room type subject to availability. Every attempt to accommodate your reservation request will be made, however, room types are not guaranteed. AT&T is a non-smoking facility. A credit card is required to hold your reservation. No charges are placed on the card until check-in. Checks may not be used to guarantee the room, although they may be used at time of check-in to pay for room charges. Room rates are subject to a 15% tax. Cancellations less than 48 hours prior to your scheduled arrival date will result in a charge equal to one night's stay.

MasterCard VISA American Express
Account Number _____ Expiration _____
Print Cardholder Name _____ Billing Zip Code _____
I authorize the following to be charged to the credit card provided: Room & Tax Incidentals & Parking Room Guarantee Only
Cardholders Signature _____

Education: High School College Post Graduate Degree: Engineering Business Construction Mgt Other
Are you an IPM Graduate: Yes No If yes, what class: _____
Shirt Size Men's Small Medium Large X Large
Biographical Data — The following information is necessary for preparation of small workshop groups.
Age: _____ Years as a project manager: _____ Years as a mechanical industry project manager: _____
Where did you hear about AIPM? _____

REGISTRATION MADE EASY:
 FAX your completed registration and hotel reservation forms to: (301) 990-9690 OR
 Mail your completed forms to: MCAA • 1385 Piccard Drive • Rockville, MD 20850-4340
Questions? Call (800) 556-3653

For Office Use
Admission: _____
Database: _____
Payment: _____