

\*\*\*Presenters\*\*\*  
 Load your PowerPoint Presentations in Advance.  
 See Registration Desk

## IEEE/PES Insulated Conductors Committee Fall, 2002 Meeting Registration Form

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

First Name for Badge: \_\_\_\_\_ Guest Name Badge First: \_\_\_\_\_ Last: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State/Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Country: \_\_\_\_\_

Phone No: \_\_\_\_\_ Fax No: \_\_\_\_\_ Email: \_\_\_\_\_

IEEE Member: Yes:  No:  Member No.\* \_\_\_\_\_ IEEE-SA Member: Yes:  No:

PES Member: Yes:  No:  Section Name \_\_\_\_\_

ICC Member Classification:\*\* Guest:  Member:  Voting Member:  Corresponding Member:

Membership in IEC or other Organization (please specify): \_\_\_\_\_

\* If you do not provide your member number, you will pay the non-member rate.

\*\* Procedures for requesting a change in classification are on the ICC website.

	<u>Code</u>	<u>Number</u>	<u>Each</u>	<u>Line Total US \$</u>
<b>- MEETING REGISTRATION -</b>				
Advance Registration & Minutes: IEEE Member	ARM	_____	@ \$150.00 US	_____
Advance Registration & Minutes: Non-IEEE Member	ARN	_____	@ \$160.00 US	_____
On-Site Registration & Minutes: IEEE Member	ORM	_____	@ \$170.00 US	_____
On-Site Registration & Minutes: Non-IEEE Member	ORN	_____	@ \$180.00 US	_____
Complimentary Registration (Students & Life Members)	CR	_____	No charge	_____
Guest/Companion Registration	GR	_____	No charge	_____
Fall 02 Minutes <sup>1</sup>	FM	_____	@ \$50.00	_____

<sup>1</sup> Note: Please register the number of spouses/guests/companions so we can properly plan.

<sup>2</sup> **Note: The ICC Minutes are now included in the registration fee.** Use this block to order extra minutes or if you are a corresponding member. **Fall Minutes will be mailed out after the meeting. Previous minutes can be obtained from JMed & Associates, Ltd., E-mail: [j.d.medek@ieee.org](mailto:j.d.medek@ieee.org), Phone: (847) 934-1154.**

**- EVENTS -**

Oct 27 Orientation Program	ONP	_____	No charge	_____
Oct 27 Reception	REC	_____	No charge	_____
Oct 29 Transnational Lunch	TL	_____	@ \$25.00 US	_____
Oct 30 Educational Program Lunch	EDL	_____	@ \$20.00 US	_____
Oct 30 Educational Program	EDP	_____	No charge	_____
Oct 30 PDH Certificate	CER	_____	No charge	_____

**- COMPANION TOURS -**

Oct 28 Ladies Luncheon Activity	ACT1	_____	@ \$25.00	_____
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Total Amount Enclosed: \_\_\_\_\_ \$US Funds Only: \_\_\_\_\_

**Please make checks payable to ICC - Sorry, we cannot accept credit cards.**

Mail completed form and check to:

**Bill Taylor**  
 3M Austin Center  
 6801 Riverplace Blvd., A146-4N-01  
 Austin, TX 78726-9000  
 Fax: 512-984-2523  
 e-mail: [wltaylor1@mmm.com](mailto:wltaylor1@mmm.com)

**This form and payment must be RECEIVED by OCTOBER 18, 2002.**  
**If not received by this date, payment must be made on site at on-site rates.**

Attendees who have registered by e-mail, mail or fax by the above date may pay on-site at advance registration rates.  
 Cash, checks, or travelers checks only in US\$.