

Registration Form Early Bird Deadline: Friday, January 20

1 Attendee Information *please check one*

Print or type all information. Make additional copies for each person registering.

Please check one:

- ASCA Member
- Non-Member
- Mid-Atlantic Chapter ISA
- New England Chapter ISA
- New York State Arborists Association
- Penn-Del Chapter ISA
- Western Chapter ISA

Name _____

Nickname/First Name for Badge (if different from above) _____

Firm _____

Address _____

City _____ State _____ Zip _____

Country (if other than U.S.) _____

Telephone _____

Fax _____

Email _____

Special Dietary Requirement: Vegetarian Other _____

Require special accommodations to participate
(Please attach a written description of your needs.)

Cancellation Policy

Written cancellations received prior to January 20, 2012 are subject to a 25% cancellation fee. No refunds will be given after January 20, 2012.

*Co-sponsoring Associations

Association members receive this special discounted registration fee because their association is co-sponsoring the 2012 Academy.

Questions?

Contact Kayleigh Bryant at (240) 404-6483 or kbryant@mgmtsol.com.

HOTEL INFORMATION

Radisson Plaza-Warwick Hotel Philadelphia (800) 967-9033

Reference "American Society of Consulting Arborists" to receive the group discount. For more details visit ASCA's website www.asca-consultants.org.

2 Registration Fees

	Before/By January 20	After January 20	After February 3
ASCA Member	<input type="checkbox"/> \$975	<input type="checkbox"/> \$1095	<input type="checkbox"/> \$1220
Co-sponsoring Associations*	<input type="checkbox"/> \$1175	<input type="checkbox"/> \$1295	<input type="checkbox"/> \$1420
Non-Member	<input type="checkbox"/> \$1375	<input type="checkbox"/> \$1495	<input type="checkbox"/> \$1620

*Co-sponsoring Associations receive this special discounted registration fee.

3 Material Fees Required Text

	A Consultant's Guide to Writing Effective Reports (required for Academy)	Example Report Book (required for Academy)
ASCA Member/ISA	<input type="checkbox"/> \$60 + \$10 shipping	<input type="checkbox"/> \$45 + \$10 shipping
Non-Member	<input type="checkbox"/> \$90 + \$10 shipping	<input type="checkbox"/> \$70 + \$10 shipping

4 Payment Options *Payment must accompany registration*

<input type="checkbox"/> Registration Fee	\$
<input type="checkbox"/> Material Fees	\$
<input type="checkbox"/> ASCA Membership Fee (from page 7)	\$
Total Amount Due	\$

Check Enclosed (made payable to ASCA • US Funds Only)

Visa MasterCard

Card # _____ Exp. Date _____

Name on Card _____ Security Code _____

Signature _____