



# ANS

## ADVANCE CONFERENCE REGISTRATION FORM

# International Topical Meeting on Probabilistic Safety Assessment (PSA-15)

April 26-30, 2015 at Sun Valley, ID



FILL OUT COMPLETELY - PLEASE PRINT

Prefix/First Name/Middle Init: \_\_\_\_\_

Name To Appear On Badge: \_\_\_\_\_

Job Title: \_\_\_\_\_

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

City/State/Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_

e-mail: \_\_\_\_\_

ANS ID #: \_\_\_\_\_

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

Company/Affiliation: \_\_\_\_\_

Company or  Home

Country: \_\_\_\_\_

Fax: \_\_\_\_\_

e-mail (cc) \_\_\_\_\_

**Special Accommodations** - ANS will contact you by email.

Diet Restrictions/Allergies

ADA

### Individual Conference Registration

Unless noted otherwise, registration includes the opening reception, (3) lunches, (1) Western barbecue buffet dinner and coffee breaks. One day ticket includes events on that day only.

Early Registration (By March 30, 2015)

Regular Registration (After March 30, 2015)

#### ANS Members

\$895

\$1,045

#### Non-Members

\$1,045

\$1,195

#### One-Day Attendee Member

Circle one: Mon Tues Wed Thurs

\$550

\$625

#### One-Day Attendee Non-Member

Circle one: Mon Tues Wed Thurs

\$625

\$720

#### Emeritus Member

\$250

\$300

#### Student

\$250

\$300

### Special Events

#### SUNDAY, APRIL 26, 2015

Additional Ticket: Opening Reception

\_\_\_ x \$85.00 \$\_\_\_\_\_

Guest name: \_\_\_\_\_

#### MONDAY, APRIL 27, 2015

Additional Ticket: Luncheon

\_\_\_ x \$45.00 \$\_\_\_\_\_

Guest name: \_\_\_\_\_

#### TUESDAY, APRIL 28, 2015

Additional Ticket: Luncheon

\_\_\_ x \$45.00 \$\_\_\_\_\_

Guest name: \_\_\_\_\_

#### WEDNESDAY, APRIL 29, 2015

Additional Ticket: Luncheon

\_\_\_ x \$45.00 \$\_\_\_\_\_

Guest name: \_\_\_\_\_

Additional Ticket: Western Barbecue Dinner

\_\_\_ x \$85.00 \$\_\_\_\_\_

Guest name: \_\_\_\_\_

#### THURSDAY, APRIL 30, 2015

Optional Technical Tour: Idaho National Laboratory

\_\_\_ x \$50.00 \$\_\_\_\_\_

Guest name: \_\_\_\_\_

### TOTAL OF MEETING REGISTRATION AND ADDITIONAL TICKETS

GRAND TOTAL: \$\_\_\_\_\_

#### METHOD OF PAYMENT (CHECK ONE)

Check     American Express     VISA     MasterCard     Diners Club     Wire Transfer

Credit Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Cardholder's Signature: \_\_\_\_\_

### Please Register On-Site After Tuesday, April 21, 2015

Make checks payable to ANS in U.S. funds and mail to ANS Registrar, 97781 Eagle Way, Chicago, IL 60678-9770. Credit card registrations may be faxed to 708/579-8221. Do not mail registrations which have been faxed. Send bank funds transfers to Chase Bank, 10. S Dearborn St., Chicago, IL 60603. Bank Phone: 312-661-5000. Bank Fax: 312-661-6417. ANS Checking Account # 824941, Bank Routing Number (ABA) 021000021 SWIFTCODE(IBAN) CHASUS33, ACH Transfers 0710-0001-3.

PLEASE NOTE: When sending something to ANS with express mail or with an overnight service provider such as FedEx, UPS, DHL, etc., please use the following address only: American Nuclear Society, 555 North Kensington Avenue, LaGrange Park, IL 60526, U.S.A. Do not use the Eagle Way address in Chicago for express and overnight mail as it will be returned to sender and this will result in a processing delay.

Registration cancellations must be made in writing prior to April 9th in order to receive a refund minus a \$150 processing fee. Meeting registrations and additional tickets canceled after April 9th, 2015 will not be refunded; however, you may send a substitute. Please contact the ANS Registrar at telephone number: 708/579-8316 or e-mail: registrar@ans.org with any questions.