## CONFERENCE REGISTRATION FORM

**GENERAL INFORMATION (Please print)**

<table>
<thead>
<tr>
<th>Field</th>
<th>Information</th>
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<tbody>
<tr>
<td>First Name</td>
<td>____________________________</td>
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<td>Last Name</td>
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<tr>
<td>University or Company</td>
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<td>Department</td>
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<td>University / Company Address</td>
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<td>Phone Number-Office</td>
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<td>E-mail</td>
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New member of AMS? _____ Yes _____ No  
1st or 2nd year faculty member: _____ Yes _____ No

**LUNCHEON/BANQUET ATTENDANCE** (included with registration fee) Please check the appropriate space.

- Welcome Reception – 05/21/14 (6pm – 7pm) ________
- Awards Luncheon - 05/22/14 (12pm – 1pm) ________
- Reception – 05/22/14 (6pm – 7pm) ________
- President’s Banquet – 05/23/14 (7pm – 10pm) ________
- Vegetarian Option – for all meals ________

**REGISTRATION FEE** - Please complete the appropriate space(s) and indicate the total fee paid. Fee is to be paid in US dollars. Please note that withdrawing your registration will result in a $150 (US) cancellation fee, which will be deducted from the total amount paid.

**Fellow Registrations**

- **AMS Active Fellow Registration** - $345.00 ________
  - Early Bird AMS Active Fellow Registration (by 04/24/14) - $295.00 ________
- **AMS Inactive Fellow Registration** - $435.00 ________
  - Early Bird AMS Inactive Fellow Registration (by 04/24/14) - $385.00 ________

**Student Registrations**

- **AMS Active Student Registration** - $285.00 ________
  - Early Bird AMS Active Student Registration (by 04/24/14) - $235.00 ________
- **AMS Inactive Student Registration** - $345.00 ________
  - Early Bird AMS Inactive Student Registration (by 04/24/14) – $295.00 ________

**Membership Registration**

- Add 12 months to membership - $90.00 ________
- **Add 5-Year-Deal** 5-Year Membership for the price of 4 years $360.00 ________

**Guest Registration**

- Spouse/Guest Lunch $50.00 ________
- Spouse/Guest Banquet $100.00 ________

**TOTAL DUE** (in US Dollars) ________
I understand that pictures will be taken during the conference. I give permission to the Academy of Marketing Science (AMS) to use any including myself in its communication media (e.g. social media, AMS Quarterly, etc.).

**Non-Online Registration Processing**

Make check/money orders payable to the Academy of Marketing Science. If paying by credit card, please provide the following information: (We accept Visa and MasterCard only.)

**Visa:** ________  **MasterCard:** ________

**Name (as it appears on the card):** __________________________________________

**Number:** __________________________________________

**Expiration Date:** __________________________________________

**Signature:** __________________________________________

**Mail this form and check (if paying by check) to:**

Academy of Marketing Science
Louisiana Tech University
P.O. Box 3072
Ruston, LA 71272
Phone: 318-257-2612
Fax: 318-257-4253