



Attendee Registration Form

To register, complete this form and fax it to +1 605-271-8498 or email to brita.price@atmia.com

1. Attendee Information

Name: _____ Job Title: _____
 Company: _____
 Address: _____
 City: _____ Province: _____ Postal Code: _____ Country: _____
 Telephone: _____ Fax: _____
 Email: _____

2. Select your Company Type:

- | | | | | |
|---|---|--|---|-------------------------------------|
| <input type="checkbox"/> Financial Institution (other) | <input type="checkbox"/> Card Association | <input type="checkbox"/> ATM Hardware | <input type="checkbox"/> Other Services | <input type="checkbox"/> Legal |
| <input type="checkbox"/> Bank | <input type="checkbox"/> Card Issuer | <input type="checkbox"/> ATM Software | <input type="checkbox"/> ATM Insurance | <input type="checkbox"/> Consultant |
| <input type="checkbox"/> Credit Union | <input type="checkbox"/> Cash Management/Distribution | <input type="checkbox"/> Kiosks & Self-Service | <input type="checkbox"/> Payment Services | <input type="checkbox"/> Media |
| <input type="checkbox"/> Cash Management | <input type="checkbox"/> Network Processor | <input type="checkbox"/> Mobile Technology | <input type="checkbox"/> Security Solutions | |
| <input type="checkbox"/> Independent ATM Deployers (IAD) | <input type="checkbox"/> Switch | <input type="checkbox"/> Service/Maintain/Refurb or Replacing ATMs | | |
| <input type="checkbox"/> Sponsoring Financial Institution | <input type="checkbox"/> Telecommunications | <input type="checkbox"/> Other _____ | | |

3. Registration Options

Option	Promotional Rate
Reconnaissance Conference & CountingOnCurrency Special: Includes, sessions and meals on April 18-20, exhibit hall pass, and conference materials. To qualify as a new attendee, you must not have attended the event in 2015. <input type="checkbox"/> Full Conference	\$450

4. Payment Information

Credit Card: American Express Visa
 Discover MasterCard Diners

Total Amount Due: _____
 Name on Card: _____
 Card Number: _____
 Expiration Date: _____ CID #: _____
 Signature: _____
 Date: _____

Credit Card Billing Address:

If your credit card billing address is NOT the same as the address listed above. Please provide it below:

Address: _____
 City: _____ Province: _____
 Postal Code: _____ Country: _____

Delegate Information

- Member Discounts:** ATMIA members receive discounts when attending this event. To receive the discount, make sure the registering company name is the same as on the ATMIA member database. To be considered a member, your membership fees must be current at the time of registration and the event.
- Membership Questions:** If you experience difficulties registering or have questions about your membership, please contact Brita Price (brita.price@atmia.com) at +1 605-271-8494. If you would like information about membership, please contact David Tente (david.tente@atmia.com) at (407) 833-7906.
- Payment:** Full payment must be received prior to event to be considered pre-registered and allowed into the conference.
- Cancellation policy:** If you are unable to attend the conference, you may substitute a colleague to take your place at no extra charge. However, if sending a replacement isn't possible, here are the cancellation terms: Three weeks or more prior to event - \$200USD administration fee will be charged. Less than 3 weeks prior to event - 25% of original payment will be refunded plus conference download information will be sent. One week or less prior to event, no refund but conference download information link will be sent. No refunds will be issued if cancellation is received after an event, or if the delegate does not attend the event. All cancellations must be in writing and emailed to Brita Price.