



IIOC 2005 REGISTRATION AND HOTEL RESERVATION FORM

* ALL PARTICIPANTS – PAPER PRESENTERS, DISCUSSANTS AND SESSION CHAIRS - MUST REGISTER BY MARCH 4TH. FAILURE TO MEET THIS DEADLINE WILL RESULT IN BEING DROPPED FROM THE PROGRAM

* A REGISTRATION FEE OF \$175.00 WILL BE CHARGED TO YOUR CREDIT CARD. IN ADDITION, A GUEST ROOM RATE OF \$112.00 PER ROOM PER NIGHT PLUS TAX WILL BE CHARGED IF STAYING OVERNIGHT

* PLEASE WRITE LEGIBLY, SIGN THE FORM AND FAX IT TO: (404) 347-9088

GROUP/COMPANY NAME: IIOC 2005 Conference, Atlanta, April 8-9

GUEST NAME: _____

AFFILIATION: _____

ADDRESS: _____

CITY/STATE/ZIP: _____

PHONE: _____

EMAIL: _____

ARRIVAL DATE: _____ DEPARTURE DATE: _____

ROOM REQUEST: KING DOUBLE NOT STAYING OVERNIGHT

SPECIAL REQUESTS: _____

CREDIT CARD TYPE: _____

NAME ON CARD: _____

CREDIT CARD NUMBER: _____

EXPIRATION DATE: _____

GUEST SIGNATURE: _____

(IF YOU DON'T SIGN, THE REGISTRATION WILL NOT BE PROCESSED)

Attending lunch on April 8, 2005 yes no

Attending lunch on April 9, 2005 yes no

* A confirmation reservation number will be emailed to you