2018 DENVER X-RAY CONFERENCE REGISTRATION FORM

The Westin Westminster Hotel • Westminster, Colorado, USA • 6 - 10 August 2018

First Name _____ Last Name _____

Organization _____

Address _____

City _____ State _____ Zip _____

Country _____ Phone _____ Email _____

☐ Check this box if you **Do Not** want your name included on the attendee list.

Registration Fees: Discount fees will only apply if registration form and payment are received by 2 July 2018.

	by 2 July	after 2 July
○ Full week: exhibits, workshops, sessions*	$725	$800
○ Monday & Tuesday: exhibits, workshops*	$675	$750
○ Wed., Thurs. & Friday: exhibits, sessions*	$675	$750
○ Presenter from Participating Exhibit Company♦	$350	$350
○ Session organizer, invited speaker*	$300	$300
○ Workshop instructor*	$275	$275
○ Student (I.D. required)	$300	$375
○ 65 and older (I.D. required)	$350	$425

*Includes access to the conference proceedings on-line, Volume 62, *Advances in X-ray Analysis*.

♦This **does NOT** include participating exhibitors that present in the commercial session, *New Developments in Instrumentation.*

Payment: Total Amount Due: $ _____

☐ Check enclosed for _____ made payable to ICDD/DXC in U.S. dollars and drawn on a U.S. bank.

Charge my: ○ Visa ○ Mastercard ○ American Express

Card number _____ CVV# _____ Expiration Date _____

Cardholder's name (please print) _____

Cardholder's signature (optional) _____

Billing address, if different from above: (address that the credit card is registered)

First Name _____ Last Name _____

Organization _____

Address _____

City _____ State _____ Zip _____

Country _____ Phone _____ Email _____

Please take the time to answer the following questions:

1) Are you primarily interested in XRD or XRF topics?

○ XRD ○ XRF ○ Equally interested in both

2) Are you a new attendee? ☐ Yes

3) What is your highest education level?

○ HS ○ BS ○ MS ○ Ph.D

4) Job Title _____

To Submit Registration Form; SAVE A COPY AND EMAIL TO: dxc@icdd.com

OR: **Fax:** 610.325.9823

Mail: ICDD, Conference Services Department, 12 Campus Boulevard, Newtown Square, PA 19073-3273 USA

ICDD reserves the right to use any and all photographs taken throughout the conference to promote the conference without additional approval from you, the participant.

Cancellation Policy: Cancellations must be submitted in writing to ICDD's Conference Services Department (dxc@icdd.com). A full refund will be issued, less a $50 processing fee, if the cancellation is received at least two weeks before the conference (Monday, 23 July 2018). No refunds will be issued for cancellations received after 23 July 2018. Please contact ICDD's Conference Services Department for any additional information, e-mail: dxc@icdd.com or phone: 610.325.9814.