

Technical Member Registration Form

The Westin – Chicago North Shore
 Wheeling, Illinois
 April 21 – 24, 2012

Company: _____
 Address: _____
 City: _____
 State: _____
 Zip: _____
 Phone: _____

First Attendee from **Tech. Member** Company – \$490: ----- \$ 490

Exhibitor's Fee – \$300: ----- \$ _____

_____ Full Conference Additional Attendees @ \$275: ----- \$ _____

_____ "1/2 Conference" Attendees @ \$190:
 (through Monday, April 23rd Lunch) ----- \$ _____

Total Amount Due: \$ _____

Please Charge the Total Amount Due to My Credit Card:

Circle: AMEX Visa MasterCard Discover Card

Cardholder's Name: _____

Card Number: _____

Exp. Date: _____

Signature: _____

Fax, Mail (or e-mail) to:

Precision Machined Products Association
 6700 West Snowville Road
 Brecksville, OH 44141

Fax: (440) 526-5803
Phone: (440) 526-0300
E-mail: mquitar@pmpa.org

- The **Individual Registration Form** must be completed for each attendee (make as many copies as you need).