

# HSAE September Meeting

Thursday, September 23th, 2010; 11:00am – 1:00pm

Reliant Center  
One Reliant Park  
Houston, TX 77054

## Program

### Leadership in Troubling Times

#### Please provide the following information.

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Nickname for badge \_\_\_\_\_ Title \_\_\_\_\_

#### Additional Registrant:

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Nickname for badge \_\_\_\_\_ Title \_\_\_\_\_

Association/Organization \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Check if you require special requirements to participate or if you have special dietary needs.

Please attach a written description of your needs.

#### Registration Fees (Please fill in the number.)

	Regular Rate (Before Noon (9/20/10))	Late/Onsite Rate (On or After Noon (9/20/10))
HSAE Member Registration _____ Registrant.....	\$35	\$45
HSAE Non-Member Registration _____ Registrant.....	\$40	\$50

#### Payment Method

Check      Check Number \_\_\_\_\_

Credit Card:       VISA       MasterCard       American Express

Card Number \_\_\_\_\_ Exp. Date \_\_\_\_\_

CCV Number (3 digits on back or 4 on front) \_\_\_\_\_

Billing Address \_\_\_\_\_

Name on card \_\_\_\_\_ Signature \_\_\_\_\_