Joint Conference on T&E Support Registration 15-17 January 2019 - Albuquerque, New Mexico

Register online at www.deps.org, or email form to registration@deps.org. Mail or fax completed form with payment to:
Directed Energy Professional Society, 7770 Jefferson St. NE, Suite 440, Albuquerque, NM 87109, Phone 505-998-4910, Fax 505-998-4917

Personal Information:

Name: _____ Phone: _____
Mr./Mrs./Ms./Dr./Rank First Initial Last

Organization: _____

Street Address: _____

City/State/Zip/Country: _____

Email : _____

☐ Please check if you require special assistance.
☐ Check here if you do not wish to receive proceedings from the event.

Release options: (please select one)

☐ My personal information may be included on the attendees list.
☐ Only my name and organization should be included on the attendees list.
☐ Information about me should not appear on the attendees list.

Short Course Registration: (Tues, 15 January) Courses are **$250** for a single half-day; **$450** for two half-day. $ _____

☐ 1. T&E of HPM Systems	0800-1200
☐ 2. T&E of HPM Systems	0800-1200
☐ 3. DE Design of Tests	1300-1700
☐ 4. Section 804 Rapid Acquistion Authority	1300-1700
☐ 5. Predicting and Validating Prototype Performance	0800-1200

Conference Registration: (Wed, 16 January – Thurs, 17 January) (please select one) $ _____

	Through 17 December	*Through 11 January*	*After 11 January*
☐ DEPS / ITEA Member Registration *	**$ 495**	**$ 595**	**$ 695**
☐ Non-Member Registration	**$ 645**	**$ 745**	**$ 845**
☐ Government / Active Military Registration **	**$ 495**	**$ 595**	**$ 695**
☐ Full-time Student ***	**$ 25**	**$ 25**	**$ 25**
☐ Plenary Keynote, Panel Chair	**$ 200**	**$ 200**	**$ 200**
☐ Panelist, Track Chair, or Presenter	**$ 395**	**$ 395**	**$ 395**
☐ Wednesday Only (member)	**$ 400**	**$ 400**	**$ 400**
☐ Wednesday Only (non-member)	**$ 475**	**$ 475**	**$ 475**
☐ Thursday Only (member)	**$ 350**	**$ 350**	**$ 350**
☐ Thursday Only (non-member)	**$ 425**	**$ 425**	**$ 425**

* DEPS/ITEA members, please specify member number: DEPS _____ ITEA # _____

** Government employees, please specify agency: _____

*** Qualifying Students, please specify school: _____

Total Payment: $ 0

☐ **Payment by Check (Make checks payable to "DEPS")**

☐ **Payment by Credit Card:** ☐ Visa ☐ MasterCard ☐ American Express

Account Number: _____ Expires: _____ CVV#: _____

Signature: _____

Please provide the following information for the credit card being used if the information is different from the Personal Information above.

Name on Card: _____ Phone Number: _____

Billing Address: _____
Street City State Zip

Persons requesting cancellation prior to 17 December will receive a full refund. Cancellations after 17 December are subject to a $100 cancellation fee.
No refunds will be given after 11 January. For further registration information, contact DEPS at 505-998-4910 or office@deps.org.