



# Conference Registration Form

Send form via email to [info@isrii.org](mailto:info@isrii.org), fax to +1 434.977.1856 or mail to ISRII, 154 Hansen Rd., Ste. 201, Charlottesville VA 22911 USA

Name: \_\_\_\_\_ (First) \_\_\_\_\_ (Last) \_\_\_\_\_ (Suffix/Degree) \_\_\_\_\_ (Badge name/Nickname)

Organization: \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State: \_\_\_\_\_ ZIP/Post Code: \_\_\_\_\_ Country: \_\_\_\_\_

E-mail: \_\_\_\_\_ Phone: \_\_\_\_\_ FAX: \_\_\_\_\_

Please DO NOT include my contact information in the registration list.

## STUDENT RATES

To qualify for the student member/meeting rates, students (e.g., fellows, interns, graduate students) must be enrolled in a formal professional education program.

I attest that I qualify for student membership/conference rates as defined above.

## PRECONFERENCE WORKSHOPS, THURSDAY, 16 MAY 2013

Choose one

	MEMBER		NONMEMBER		STUDENT		
	early	after 4/19	early	after 4/19	early	after 4/19	
LifeGuide: Open Source Software for Internet Interventions Usability & User-Centered Design for Internet Intervention	<input type="checkbox"/> \$85	<input type="checkbox"/> \$130	<input type="checkbox"/> \$145	<input type="checkbox"/> \$190	<input type="checkbox"/> \$45	<input type="checkbox"/> \$90	
Refining Support Models for Internet-Delivered Treatments	<input type="checkbox"/> \$85	<input type="checkbox"/> \$130	<input type="checkbox"/> \$145	<input type="checkbox"/> \$190	<input type="checkbox"/> \$45	<input type="checkbox"/> \$90	\$ _____

## ANNUAL CONFERENCE, 16 - 18 MAY 2013

Full Conference, 16 - 18 May 2013

	MEMBER		NONMEMBER		STUDENT		
	early	after 4/19	early	after 4/19	early	after 4/19	
Annual Conference	<input type="checkbox"/> \$495	<input type="checkbox"/> \$595	<input type="checkbox"/> \$695	<input type="checkbox"/> \$795	<input type="checkbox"/> \$195	<input type="checkbox"/> \$295	\$ _____

One Day-Only Registration

	MEMBER		NONMEMBER		STUDENT		
	early	after 4/19	early	after 4/19	early	after 4/19	
Thursday afternoon, 16 May 2013, Only or	<input type="checkbox"/> \$130	<input type="checkbox"/> \$142.50	<input type="checkbox"/> \$187.50	<input type="checkbox"/> \$210	<input type="checkbox"/> \$47.50	<input type="checkbox"/> \$70	\$ _____
Friday, 17 May 2013, Only or	<input type="checkbox"/> \$260	<input type="checkbox"/> \$285	<input type="checkbox"/> \$375	<input type="checkbox"/> \$420	<input type="checkbox"/> \$95	<input type="checkbox"/> \$140	\$ _____
Saturday, 18 May 2013, Only	<input type="checkbox"/> \$260	<input type="checkbox"/> \$285	<input type="checkbox"/> \$375	<input type="checkbox"/> \$420	<input type="checkbox"/> \$95	<input type="checkbox"/> \$140	\$ _____

## SPECIAL EVENTS

Participate in eHealth Intervention Application Throwdown (complimentary)

Special Event: Night at Andy's Jazz Club  Member/Nonmember Rate: \$100  Student Rate: \$75 \$ \_\_\_\_\_

Guest Rate: \$100 \$ \_\_\_\_\_

## OPENING RECEPTION, 16 MAY 2013

Guest ticket to opening reception (the reception is complimentary for conference attendees) \$20 per guest x \_\_\_\_\_ guest(s) \$ \_\_\_\_\_

## 2013 ISRII MEMBER DUES

Add a 2013 membership to your registration. New members must submit an application. See [www.isrii.org](http://www.isrii.org) for details.

Full Membership (1 January - 31 December 2013) - \$100

Student Membership (1 January - 31 December 2013, student verification required) - \$50 \$ \_\_\_\_\_

## SPECIAL NEEDS

Dietary restrictions  Food Allergy  Kosher  Vegetarian  Vegan

Please indicate if you have other special needs. A staff member will contact you directly. This conference complies with the Americans with Disabilities Act by providing individuals with disabilities access to programs, services and activities.

## EMERGENCY CONTACT (required)

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

## PAYMENT INFORMATION

**TOTAL FEES (Events & Membership)** \$ \_\_\_\_\_

Check Number: \_\_\_\_\_ (payable to ISRII) Credit Card:  Visa  Mastercard  American Express

Cardholder: \_\_\_\_\_ Signature: \_\_\_\_\_

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

Card number: \_\_\_\_\_ Exp Date: \_\_\_\_\_ CV2/CSC\*: \_\_\_\_\_

\*The CV2 (or CSC) code is the three digit security code located on the signature strip on the back of Visa and Master Cards. American Express cards have a four-digit security code located on the front.