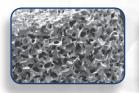
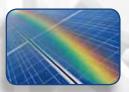


THE 8TH PACIFIC RIM INTERNATIONAL CONGRESS ON ADVANCED MATERIALS AND PROCESSING

REGISTRATION FORM

August 4-9, 2013 • Hilton Waikoloa Village • Waikoloa, Hawaii







WEB

Register in advance online at http://www.tms.org/Meetings/Specialty/PRICM8/ Online registration requires credit card payment. FAX

Fax this form to: TMS Meeting Services Fax: (724) 776-3770 Fax registration requires credit card payment.



Return this form to: TMS Meeting Services 184 Thorn Hill Road Warrendale, PA 15086 -7514 USA

This registration form does not include information about the optional social program. For information about available tours, visit the http://www.tms.org/meetings/specialty/pricm8/social.aspx.

negistration Deadine: Julie 4, 2013	
Payment must accompany form. First Name: Middle Initial:	REGISTRATION FEE Full congress registration fee includes technical sessions, exhibition, welcom reception, poster reception, refreshment breaks, lunch on Monday, Tuesda and Thursday, and one ticket to the congress banquet. Advance** On-site Full Congress \$\Begin{array}{c} \text{Congress} & \Begin{array}{c} \text{Solution} \text{\$\text{Solution}} \text{\$\text{\$\text{Solution}} \$\text{\$\tex
Last Name:	
Name/Nickname for badge:	Student Full Congress* \$450 \$550 All fees are in U.S. dollars. ** Advance registration fees apply through June 4, 2013 only.
Title: This address is Business Home New Address Address Correction Street Address:	2014 TMS MEMBERSHIP Professional Member \$115 Recent Graduate (2011 or 2012) \$57.50 Material Advantage Student Member (ACerS/AIST/ASM/TMS) \$30
City: State/Province:	
Zip/Postal Code:Country: Telephone:Fax:	Number: @ \$120/each =
E-mail:	Indicate Any Dietary Restrictions:
	•
REGISTRATION TOTAL	PAYMENT

Congress Registration \$_____
TMS Membership \$_____

Additional Banquet Tickets Social Activities Total Payment

Payment Method (check all that apply):

Check, Bank Draft, Money Order
(Make checks payable to TMS)

Credit Card

Payment should be made in U.S. dollars drawn on a U.S. bank.

☐ Visa ☐ MasterCard ☐ Discover ☐ American Express

Card No_____ Expiration Date____ CVV#____

Cardholder Name ______Signature: _____

I authorize TMS to charge my credit card in the amount of \$

CANCELLATION/REFUND POLICY: Written requests must arrive at TMS no later than June 4, 2013. You will forfeit 25% of your registration fee due to cancellation. No refunds will be processed after the advance registration deadline date of June 4, 2013.