



WEB

Register in advance online at  
[www.tms.org/SFF2018](http://www.tms.org/SFF2018)  
 Online registration requires credit card payment.

FAX

Fax this form to:  
 TMS Meeting Services  
 Fax: 1-724-776-3770  
 Fax registration requires credit card payment.

MAIL

Return this form to:  
 TMS Meeting Services  
 5700 Corporate Drive Suite 750  
 Pittsburgh, PA 15237

**REGISTRATION DEADLINE: August 9, 2018 - Payment must accompany form.**

First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Last Name: \_\_\_\_\_

Name/Nickname for badge: \_\_\_\_\_

Affiliation/Employer: \_\_\_\_\_

Title: \_\_\_\_\_

This address is  Business  Home  New Address  Address Correction

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

City: \_\_\_\_\_

State/Province: \_\_\_\_\_

Zip/Postal Code: \_\_\_\_\_

Country: \_\_\_\_\_

Telephone: \_\_\_\_\_

Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

Indicate Any Dietary Restrictions for Registrant:

Gluten-Free  Kosher  Vegetarian  Other: \_\_\_\_\_

**REGISTRATION**

The full-conference and student registration fees include full meeting access, the Sunday evening pre-conference social event, the Monday evening awards banquet, lunch on Tuesday, and a flash drive copy of the post-conference proceedings\*. Daily registration includes one social event ticket on that day, but does not include a copy of the proceedings.

Full-Conference  \$620

Student\*\*  \$400

Daily  Monday  Tuesday  Wednesday \$250/day

*\*The conference proceedings on a flash drive will be sent to all full-conference and student registrants at the address provided on this form. If the proceedings should be sent to a different address, please notify TMS before August 15. Individuals who cancel their registrations and do not receive a refund are entitled to the flash drive conference proceedings.*

*\*\*Must be a full-time graduate or undergraduate student. A copy of student school ID card is required for non-Material Advantage members; must mail or fax form with a copy of school ID card.*

**SOCIAL EVENTS**

**I plan to attend the Sunday pre-conference event**

Yes  No Additional Tickets: \_\_\_\_\_ @ \$0/each = \_\_\_\_\_

**I plan to attend the Monday evening Awards Banquet**

Yes  No Additional Tickets: \_\_\_\_\_ @ 100/each = \_\_\_\_\_

Guest name for additional tickets: \_\_\_\_\_

Indicate Any Dietary Restrictions for Guest:

Gluten-Free  Kosher  Vegetarian  Other: \_\_\_\_\_

*Note: Guests do not receive a name badge or admission to technical sessions.*

**Request a Visa Letter**

To request an official visa invitation letter for this conference, please send your request to [MtgServ@tms.org](mailto:MtgServ@tms.org). Letters will be generated as requested, so you can submit it along with other required documentation to the appropriate Consulate/Embassy. Please note that this letter does not guarantee you will be granted a visa. If you need additional assistance please call at 1-724-776-9000, ext. 211.

**REGISTRATION TOTAL**

Conference Registration \$ \_\_\_\_\_

Social Event Guest Tickets \$ \_\_\_\_\_

Total Payment \$ \_\_\_\_\_

**PAYMENT**

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

Visa  MasterCard  Discover  American Express  Check

Card #: \_\_\_\_\_ Expiration Date: \_\_\_\_\_ CVV#: \_\_\_\_\_

Cardholder Name: \_\_\_\_\_

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

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