

## **REGISTRATION FORM**

August 17-19, 2020 Hilton Austin Hotel

Austin, Texas, USA

Return this form to: MAIL

TMS Meeting Services

Pittsburgh, PA 15237

5700 Corporate Drive Suite 750

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## Register in advance online at www.tms.org/SFF2020

Online registration requires credit card payment.

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

## **REGISTRATION DEADLINE:** August 13, 2020 - Payment must accompany form.

FAX

First Name:	Middle Initial:	REGISTRATION		
Last Name: Name/Nickname for badge: Affiliation/Employer:		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,		
Title:		but does not include a copy of the proceedings.		
This address is 🗌 Business 🗌 Home 🗌	New Address 🗌 Address Correction	Full-Conference\$640Student**\$420		
Street Address:		Daily 🗌 Monday 🗌 Tuesday 🗌 Wednesday \$260/day		
ity:		*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 19. 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; must mail or fax form with a copy of school ID card.		
		SOCIAL EVENTS		
Fax: E-mail:		I plan to attend the Sunday pre-conference event ☐ Yes ☐ No Additional Tickets: @ \$0/each =		
Do not include my: name affiliation address in the SFF 2020 proceedings atte will appear in the directory.) Indicate Any Dietary Restrictions Gluten-Free Vegetarian	for Registrant:	I plan to attend the Monday evening Awards Banquet         □ Yes □ No       Additional Tickets:@105/each =         Guest name for additional tickets:       @105/each =         Indicate Any Dietary Restrictions for Guest:          □ Gluten-Free □ 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. 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 TO	DTAL	PAYMENT
Conference Registration Social Event Guest Tickets Total 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 \$
REFUND POLICY: Written requests must arrive at TMS no later than August 13, 2020. No refunds will be issued after August 13, 2020. A \$75 processing fee is charged for all cancellations.		