The 5th International Congress on 3D Materials Science 2021

REGISTRATION FORM

June 29-July 2, 2021

Hyatt Regency Washington on Capitol Hill • Washington, D.C., USA

Register online at www.tms.org/3DMS2021
Online registration requires credit card payment.

FAX

Fax this form to: TMS Meeting Services Fax: (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 USA

Discount Registration Deadline: May 18, 2021

Payment must accompany form. Forms received after May 18, 2021 will be processed at the standard rate. REGISTRATION Registration fee includes technical sessions, welcome reception. First name: Middle Initial: refreshment breaks, poster reception, and one ticket to the congress dinner. Discount* Standard __ \$895 Member Nonmember** \$950 \$1,050 Name/Nickname for badge: Student*** \$450 \$450 ** Includes TMS e-membership through 2022. * Discount rates through May 18, 2021. Affiliation/Employer: *** Copy of student school identification card must accompany form. Title:___ I plan on attending the congress dinner, included in my registration fee: ☐ Yes ☐ No This address is Business Home New Address Address Correction ADDITIONAL/GUEST TICKETS FOR SOCIAL FUNCTIONS Street Address: Congress Dinner Quantity: _____ @ \$160/each = ____ City: _____ State/Province: ___ Guest/Spouse Name: Zip/Postal Code: _____ Country: ____ Please note: Guests do not receive admission to technical sessions. Telephone: Fax: Indicate Any Dietary Restrictions for Guest: Gluten-Free Vegetarian Other: Indicate Any Dietary Restrictions: ☐ I agree to receive communications from TMS on society news, events, and ☐ Gluten-Free ☐ Vegetarian ☐ Other: initiatives (European Union, Brazil, Canada, and China residents only). ☐ I permit TMS to share my e-mail address with its 3DMS 2021 exhibitor/sponsor **REGISTRATION TOTAL PAYMENT** Payment should be made in U.S. dollars drawn on a U.S. bank. Congress Registration Additional/Guest Tickets Card #: _____ Expiration Date: _____ CVV#: ____ Total Payment Cardholder Name: Payment Method (check all that apply): Signature: Check, Bank Draft, Money Order I authorize TMS to charge my credit card in the amount of \$ (Make checks payable to TMS.) REFUND POLICY: Written requests must arrive at TMS no later than May 18, 2021. Credit Card No refunds will be issued after May 18, 2021. A \$75 processing fee is charged for all cancellations.