

# 2013 European Information Management Conference

10–12 November 2013 | Renaissance Amsterdam | Amsterdam, The Netherlands

Please print. Use a separate form for each registrant. Duplicate as necessary.

## FOR OFFICE USE ONLY

Cust# \_\_\_\_\_ Date \_\_\_\_\_

Mtg Ord #1- \_\_\_\_\_

Complete Name \_\_\_\_\_ Nickname for Badge \_\_\_\_\_

Job Title \_\_\_\_\_

Company \_\_\_\_\_

Company Mailing Address \_\_\_\_\_

City \_\_\_\_\_ | State/Province \_\_\_\_\_ | ZIP/Postal Code \_\_\_\_\_ | Country \_\_\_\_\_

Business Phone \_\_\_\_\_ | Business Fax \_\_\_\_\_ | Website \_\_\_\_\_

Business E-mail (required) \_\_\_\_\_

Emergency Contact Name \_\_\_\_\_ | Day Phone \_\_\_\_\_ | Evening Phone \_\_\_\_\_

To register, make your selections in boxes A–C, add the subtotals, and indicate the total amount in box D.

I am member of ☐ NAID ☐ PRISM ☐ Both ☐ Neither

### Full Conference Registration (10–12 November 2013) A

Take advantage of the member rate for this conference by selecting the appropriate dues level below and including it in your total payment.

	On or before 10/1/2013	After 10/1/2013
<input type="checkbox"/> Member	\$699 USD	\$799 USD
<input type="checkbox"/> Member Employee	\$656 USD	\$756 USD
<input type="checkbox"/> Nonmember	\$999 USD	\$1,099 USD
<input type="checkbox"/> Nonmember Employee	\$819 USD	\$919 USD
<input type="checkbox"/> Spouse/Guest	\$275 USD	\$315 USD
Spouse/Guest Name _____		
<input type="checkbox"/> Exhibitor Representative	\$399 USD	\$399 USD
	<b>Subtotal A \$</b>	_____

### Optional Events B

#### Dinner and Tour of Canals Monday, 11 November

☐ \$120 USD No. of tickets \_\_\_\_\_ x \$120 USD

Spouse/Guest Name \_\_\_\_\_

#### Tour of Hulshoff Archiefbeheer Monday, 11 November

☐ No fee No. of tickets \_\_\_\_\_

Spouse/Guest Name \_\_\_\_\_

**Subtotal B \$** \_\_\_\_\_

### Special Requests C

- ☐ I will need vegetarian meals. (SDV)  
☐ I require special assistance. Please contact me. (SA)  
☐ I have other needs. Please contact me. (OTH)

### Total D

If payment does not accompany this form, your registration will not be processed.

A + B = **Total \$** \_\_\_\_\_

**4** easy ways  
to register

**Mail**  
PRISM International  
8735 W. Higgins Road, Suite 300  
Chicago, IL 60631

*Note.* For mailed registrations, allow at least 20 days for delivery to PRISM.

**Phone\*** +1.847.375.6344  
+1.800.336.9793  
**Fax\*** +1.847.375.6343

\*Credit card payment only

**Online\***  
www.prismintl.org

### Payment

- ☐ Visa ☐ Mastercard ☐ Discover ☐ American Express ☐ Check (enclosed)
- Make checks payable to PRISM International in U.S. funds
  - A charge of \$50 USD will apply to checks returned for insufficient funds.
  - If rebilling of a credit card charge is necessary, a \$75 USD processing fee will be charged.
  - I authorize PRISM International to charge the credit card listed below amounts reasonably deemed by PRISM International to be accurate and appropriate.

Account Number \_\_\_\_\_ Exp. Date \_\_\_\_\_

Cardholder's Name (print) \_\_\_\_\_ Signature \_\_\_\_\_

**Cancellation Policy:** All cancellations must be made in writing. A \$50 USD processing fee will be charged for all cancellations postmarked before 26 October 2013. No refunds will be made under any circumstances on cancellations postmarked after 26 October 2013. PRISM International reserves the right to substitute faculty or to cancel or reschedule sessions because of low enrollment or other unforeseen circumstances. If PRISM International must cancel the entire meeting, registrants will receive a full credit or refund of their paid registration fee. No refunds can be made for lodging, airfare, or any other expenses related to attending the meeting.