

PBS 2001 Technology Conference

April 20-22, 2001 Las Vegas, Nevada

Name for Participants List: _____

Title: _____

Organization: _____

Address: _____

City _____ State _____ Zip _____

Phone _____ Fax _____

Name for Badge (if different from above) : _____

Background Information (please check one):

- | | |
|---|--|
| <input type="checkbox"/> Engineering Professional | <input type="checkbox"/> Operations Professional |
| <input type="checkbox"/> IT Professional | <input type="checkbox"/> Other (please specify): _____ |

Registration Fees

(Note: All fees must be pre-paid prior to registration confirmation (no purchase orders).)

	<u>Regular Registration</u> (Postmarked on or before March 9)	<u>Late Registration</u> (Postmarked after March 9)
Regular (3-day) Registration - PBS Member	\$360	\$460
Regular (3-day) Registration - PBS Non-Member	\$460	\$560
One Day Registration	\$250	\$350
Two Days plus DTV RF Transmission Seminar	\$475	\$575
Two Days plus DTV Studio Technology Seminar	\$475	\$575
DTV RF Transmission Seminar (Sunday 4/22) only	\$225	\$325
DTV Studio Technology Seminar (Sunday 4/22) only	\$225	\$325
CPB Transition Fund Discount (if applicable)	-\$ 50	-\$ 50

Total Registration Fee enclosed, or to be charged to credit card as noted below: _____

Guest Event Tickets (Note: One set of event tickets is included with each regular registration)

Friday & Saturday evening social activities _____ @\$50/person

(If guest ticket fees are not included in credit card authorization or company check, please enclose a personal check with this registration form.)

Payment Information

(Note: Registration forms with incomplete payment information will not be processed).

- | | |
|--|--|
| <input type="checkbox"/> Check # _____ | <input type="checkbox"/> Cost Center (for PBS staff) _____ |
|--|--|

(Complete all information below for credit card payments. **PLEASE PRINT CLEARLY**)

Credit card number: _____ Exp. Date: _____

Credit Card Type: ☐ AMEX ☐ MasterCard ☐ VISA

Name as it appears on card: _____

Card Holder Signature: _____ Date: _____

Registrant Signature: _____ Date: _____

**Return Completed Registration Forms to
PBS 2001 Technology Conference, 1320 Braddock Place, Alexandria VA 22314, Attn: Ralph Schuetz**