

Convention Registration Form

FORM ONE

Promo Code: _____

Yes! I want to advance my career. Please process my ALOA 2009 Registration Form. I understand that ALOA 2009 is a public event and that I may be photographed while attending classes, the Security Expo, and related events.

Please type or print your information

ALOA Member # _____
 SAVTA Member # _____
 Non-Member
 PRP/STPRP Status: RL CRL CPL CML CPS CMST
 Is this your first ALOA Convention? Yes No

Registrant:

First Name _____ MI _____
 Last Name _____
 Name for Badge _____
 Company Name _____
 Street or PO Box _____
 City _____
 State or Providence _____
 Zip/Postal Code _____
 Country _____
 Work Number _____
 Home Number _____
 Fax Number _____
 E-mail _____
 Is this an address change? Yes No

Non-locksmith Guests (complete only if attending)

First/Last Name: _____
 First/Last Name: _____

FORM OF PAYMENT:

Check Number _____
 Charge: MasterCard Visa Discover American Express
 Card Account Number: _____
 Card Expiration Date: _____
 Print Name: _____
 Signature: _____

PACKAGES/INDIVIDUAL CLASSES

	By July 7	After July 7	
Jackpot Package			
<input type="checkbox"/> Member	\$765	\$865	= _____
<input type="checkbox"/> Nonmember	\$1095	\$1195	= _____
Royal Flush Package			
<input type="checkbox"/> Member	\$545	\$645	= _____
<input type="checkbox"/> Nonmember	\$795	\$895	= _____
Full House Package			
<input type="checkbox"/> Member	\$195	\$245	= _____
<input type="checkbox"/> Nonmember	\$320	\$370	= _____
Individual Full-Day Classes			
<input type="checkbox"/> Member	\$245	\$295	= _____
	x____(# days)	x____(# days)	= _____
<input type="checkbox"/> Nonmember	\$385	\$445	= _____
	x____(# days)	x____(# days)	= _____
Individual Half Day Classes			
<input type="checkbox"/> Member	\$95	\$120	= _____
	x____(# days)	x____(# days)	= _____
<input type="checkbox"/> Nonmember	\$135	\$160	= _____
	x____(# days)	x____(# days)	= _____
Bonus Sunday Class			
<input type="checkbox"/> With Package	\$135	\$185	= _____
<input type="checkbox"/> Without Package	\$245	\$295	= _____

IF PAYING BY CHECK Send registration forms 1, 2, and 3 with your check to: ALOA, P.O. Box 972143 • Dallas, TX 75397-2143

IF PAYING BY CREDIT CARD Send registration forms 1, 2, and 3 with your credit card information to: ALOA • 3500 Easy Street • Dallas, TX 75247 -or- FAX registration forms 1, 2, and 3 with your credit card information to: ALOA 214.819.9736

EXPO, MEETINGS, EVALUATIONS AND EVENTS

	By July 7	After July 7
EXHIBITS ONLY		
<input type="checkbox"/> Member	FREE	\$10 _____
<input type="checkbox"/> Nonmember	\$20	\$30 _____
<input type="checkbox"/> Non-Locksmith/Guest	\$5	\$10 _____

PRP AFTER CLASS ELECTIVE TEST—MEMBERS ONLY

Check a box for each day that you will be taking a PRP elective test after the class:

<input type="checkbox"/> Sunday	\$10	\$20	_____
<input type="checkbox"/> Monday	\$10	\$20	_____
<input type="checkbox"/> Tuesday	\$10	\$20	_____
<input type="checkbox"/> Wednesday	\$10	\$20	_____
<input type="checkbox"/> Sunday	\$10	\$20	_____

SATURDAY, AUGUST 15 • 6-10PM

PRP EVALUATION

<input type="checkbox"/> Member	\$35	N/A	_____
<input type="checkbox"/> Nonmember	\$230	N/A	_____

STPRP Evaluation, CPS

<input type="checkbox"/> ALOA/SAVTA Member	\$80	N/A	_____
<input type="checkbox"/> Nonmember	\$275	N/A	_____

STPRP Evaluation, CMST

<input type="checkbox"/> ALOA/SAVTA Member	\$125	N/A	_____
<input type="checkbox"/> Nonmember	\$320	N/A	_____

Dinner Banquet Only

<input type="checkbox"/> With package (includes 1 ticket only)	\$50	=	_____
<input type="checkbox"/> Member/Nonmember	\$75 x _____	=	_____
<input type="checkbox"/> Child under 12	\$30 x _____	=	_____

ALOA Open Golf Tournament

<input type="checkbox"/> Golfer	\$150 x _____	=	_____
<input type="checkbox"/> Shirt Size _____			

Fees and Materials

Lab Fees

<input type="checkbox"/> 105, 118	\$200 x _____	=	_____
<input type="checkbox"/> 106, 110, 112, 318, 418	\$100 x _____	=	_____
<input type="checkbox"/> 108	\$50 x _____	=	_____
<input type="checkbox"/> 113, 313, 320	\$75 x _____	=	_____
<input type="checkbox"/> 208, 420	\$40 x _____	=	_____
<input type="checkbox"/> 214	\$250 x _____	=	_____
<input type="checkbox"/> 304, 404	\$20 x _____	=	_____
<input type="checkbox"/> 306	\$280 x _____	=	_____
<input type="checkbox"/> 319, 419	\$125 x _____	=	_____
<input type="checkbox"/> 406	\$175 x _____	=	_____
<input type="checkbox"/> 712	\$400 x _____	=	_____

PRP Resource Guide

<input type="checkbox"/> Member	\$20 x _____	=	_____
<input type="checkbox"/> Nonmember	\$30 x _____	=	_____

Safe Technicians Reference Manual

<input type="checkbox"/> Member	\$135	_____
<input type="checkbox"/> Nonmember	\$200	_____

Membership RENEWAL If applying for NEW membership, please complete the application (Form 5)

Annual Dues

<input type="checkbox"/> Active/Allied Member (US/US Territories)/Prob.Mem (MEM1)	\$155	_____
<input type="checkbox"/> Int'l Member (MEM2)	\$130	_____
<input type="checkbox"/> Retired Member (MEMR)	\$40	_____
<input type="checkbox"/> Canadian Air Mail (AIR1)	\$20	_____
<input type="checkbox"/> Overseas Air Mail (AIR2)	\$50	_____

Application Fee (APPL)

\$50 (WAIVED)

TOTAL AMOUNT:

PAYABLE IN U.S. FUNDS ONLY!

\$ _____