

# REGISTRATION FORM

Alaska Power Association 59<sup>th</sup> Annual Meeting

Name of Utility or Company: \_\_\_\_\_

Contact Name for Registrations: \_\_\_\_\_

Phone Number: \_\_\_\_\_ E-mail: \_\_\_\_\_

## ATTENDEES

Please list name and title to be displayed on badge.

Name \_\_\_\_\_ Title \_\_\_\_\_

E-mail \_\_\_\_\_ Companion Name \_\_\_\_\_

**Type of Registration:** *Please mark all that apply.*

Full, Member	Wednesday Only	Member Tradeshow Exhibitor
Full, Non-Member	AIE Reception Only	NRECA Director Training
Full, Student	APA Banquet Only	

**Please indicate tour participation interest:** *Please mark all that apply.*

Cold Climate Housing Research Center (CCHRC)	Wednesday, August 11 from 8:00am to 10:00am
North Pole Expansion Power Plant (NPEP)	Wednesday, August 11 from 2:00pm to 4:00pm
North Pole Expansion Power Plant (NPEP)	Thursday, August 12 from 2:00pm to 4:00pm
Battery Energy Storage System (BESS)	<i>date and time to be determined</i>
Chena Power & Chena Hot Springs	Friday, August 13 beginning at 1:30pm

Name \_\_\_\_\_ Title \_\_\_\_\_

E-mail \_\_\_\_\_ Companion Name \_\_\_\_\_

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*Please list additional attendees on the next page*

**REGISTRATION DEADLINE IS JULY 1, 2010.**

See the Registration Information page for more details.

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# Payment Form

Alaska Power Association 59<sup>th</sup> Annual Meeting

August 11-13, 2010 Fairbanks, Alaska

Name of Utility or Company: \_\_\_\_\_

Contact Name for Billing: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ E-mail: \_\_\_\_\_

Please Bill (available to APA members only)

Check is Enclosed (made payable to Alaska Power Association)

Credit Card (please complete Charge Form below)

Please indicate below the amount to be charged for:

Full Registration, Member Rate \_\_\_\_\_ X \$ 550.00 = \$ \_\_\_\_\_

Full Participants, Non-Member Rate \_\_\_\_\_ X \$ 650.00 = \$ \_\_\_\_\_

Full Registration, Student Rate \_\_\_\_\_ X \$ 300.00 = \$ \_\_\_\_\_

Wednesday-Only Registration \_\_\_\_\_ X \$ 250.00 = \$ \_\_\_\_\_

Member Trade Show Exhibitor \_\_\_\_\_ X \$ 650.00 = \$ \_\_\_\_\_

AIE Reception Only \_\_\_\_\_ X \$ 75.00 = \$ \_\_\_\_\_

APA Banquet Only \_\_\_\_\_ X \$ 75.00 = \$ \_\_\_\_\_

NRECA Director Training (NRECA # 916.1) \_\_\_\_\_ X \$ 550.00 = \$ \_\_\_\_\_

Monetary Contribution to purchase Door Prizes \$ \_\_\_\_\_

Monetary Contribution to purchase Auction Items \$ \_\_\_\_\_

Total \$ \_\_\_\_\_

## **\*VISA or MASTERCARD only\***

Card Holder Name

(as it appears on card): \_\_\_\_\_

Billing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone #: \_\_\_\_\_

Card #: \_\_\_\_\_ Security Code: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ Type of Card: MasterCard Visa

Cardholder's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*Digital signatures are not accepted.*

Please return this form with the completed registration form.