Speaker Primary Registration Form

(One form per speaker; attendees and exhibitors fill out attendee or exhibitor registration form)

First Name: ____________________________ Last Name: ____________________________

Nickname for Badge: ____________________________________
(if different from First Name)

Organization Name for name badge: ____________________________

Address: ________________________________________________

Address 2: _______________________________________________

City    State   Zip   Country

Phone: __________________ Fax: __________________ Email*: __________________
*Confirmation and secondary information will be sent via email

Speaker Registration Options:

1. All speakers must complete and submit this registration form, regardless whether they will attend any other sessions.

2. Speakers for Plenary Sessions receive complimentary registration only for that day. If they would like to attend any other days, they must pay for registration (see below) for those additional days or the entire ISDC.

3. Speakers for all other sessions must pay for registration (see below) to attend any sessions other than their own. Attendance at the speaker’s own session is complimentary, of course.

NOTE: Paid Registration includes admittance to all educational sessions and Saturday Awards Gala.

Plenary/Session: __________________________________________

Day of Plenary/Session: ______________________________________

<table>
<thead>
<tr>
<th>Speaker Registration (paid)</th>
<th>Registrations faxed or postmarked:</th>
<th>Until 5/15/05</th>
<th>After 5/15/05</th>
</tr>
</thead>
<tbody>
<tr>
<td>Speaker (Full Registration)</td>
<td>Adult</td>
<td>$175</td>
<td>$200</td>
</tr>
<tr>
<td></td>
<td>Senior (65 or older)</td>
<td>$150</td>
<td>$175</td>
</tr>
<tr>
<td></td>
<td>Student (attending sessions)</td>
<td>$150</td>
<td>$175</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Speaker (Daily Registration)</th>
<th>Thurs</th>
<th>Fri</th>
<th>Sat</th>
<th>Sun</th>
<th>#</th>
<th>#</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Check each day that applies)</td>
<td>$ 40</td>
<td>$ 50</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Donation: Voluntary contribution to help fund NSS’s 2005 awards program $___________

Voluntary contribution to help fund NSS’s space advocacy programs $___________

Payment – Total Fee Due: $___________

☐ Check - Check Number__________ (checks made payable to NSS-ISDC 2005)

☐ Credit Card - Visa _____ Mastercard _____ American Express _____

Name on Card __________________________________________

Card # ___________________________ Expiration Date ____________

Signature: __________________________________________

Cancellation Policy:

All cancellations must be received in writing. Cancellations received in writing by May 12, 2005 will receive a full refund less a $25 processing fee. Cancellations received after May 12, 2005 are nonrefundable.

Return to:
NSS-ISDC 2005
1620 I Street, NW, #615
Washington, DC 20006
Or fax to: 202-463-8497

Secondary registration information (including tours and meals) can be found at the ISDC 2005 website http://isdc.nss.org/2005