

AMERICAN METEOROLOGICAL SOCIETY
29TH CONFERENCE ON AGRICULTURAL AND FOREST METEOROLOGY
19TH SYMPOSIUM ON BOUNDARY LAYERS AND TURBULENCE
NINTH SYMPOSIUM ON THE URBAN ENVIRONMENT

2-6 AUGUST, 2010 KEYSTONE, CO

NAME: _____ WORK TEL #: _____
AFFILIATION: _____ FAX #: _____
WORK ADDRESS: _____ IN CASE OF EMERGENCY, CONTACT #: _____

E-MAIL: _____

AFFILIATION TYPE: _____ (See Box 1 on reverse)

DO YOU WANT YOUR NAME PUBLISHED ON THE ATTENDANCE LIST? (See reverse) YES NO

GUEST/HOTEL INFORMATION (FOR AMS INFORMATION ONLY; ATTENDEE IS RESPONSIBLE FOR MAKING OWN HOTEL RESERVATION)

ARE YOU BRINGING A GUEST? YES NO If yes, NAME OF YOUR GUEST (FOR BADGE): _____
HOTEL NAME: _____
ARRIVAL DATE: _____ DEPARTURE DATE: _____ SINGLE or DOUBLE

REGISTRATION PACKAGES (SEE BOX 2 ON PAGE 2)

1) PACKAGE CHOICE: (SEE BOX 2 ON PAGE 2) **2) ATTENDEE TYPE:** _____ (SEE BOX 3 ON REVERSE)
 Full-Week One-Day

If One-Day Package, Indicate DAY OF WEEK: _____

ADDITIONAL TICKETS

Full week package includes a banquet ticket for the Barn Dance BBQ on 8/5.
Are you / Do you require any of the following meal types (circle one): Vegetarian Vegan Kosher Gluten-Free
Number of **Additional BARN DANCE BBQ** tickets (adults: \$60, children 4-12 \$40, 3 and under: free): # ___ : Price \$ ___

TOTAL CONFERENCE FEES AND METHOD OF PAYMENT

CHECK PURCHASE ORDER #: _____ REGISTRATION FEE: \$ _____
Additional Tickets Fees: \$ _____
 CREDIT CARD (MasterCard VISA AMEX) **TOTAL CONFERENCE FEES \$** _____

Card # _____
Expiration Date: _____
Name on Credit Card: _____
Street Address as it appears on Credit Card Statement: _____

City: _____ State/Prov. _____ Zip/Postal Code: _____

MAILTO: AMS 29AgForest/19BLT/9Urban Conference, 45 Beacon St., Boston, MA 02108
Fax: (617) 742-8718 or (617) 249-0272

REGISTRATION POLICY

Submit this form with payment by **06/21/10** in order to receive the lower registration rate. Registrations received at AMS from 05/11/10 and through the conference dates will be processed at the higher rate (SEE RATES BELOW). **After 07/02/10 please register at the meeting or On-line.** Payment may be made with check, purchase order (HARD COPY REQUIRED) or credit card (MASTERCARD/VISA/ AMERICAN EXPRESS). FAXED registration forms must be accompanied by payment (PO OR CREDIT CARD # ONLY). Refunds are given (LESS A \$25 FEE) if cancellation is received by **26 July, 2010** (NO REFUNDS THEREAFTER). **Registration will not be processed without payment.** Confirmation of registration will be e-mailed.

ATTENDANCE LISTS

The AMS will be making the attendance list from this meeting available to attendees and exhibitors (if participating). The list will be provided in electronic form only and will include attendee name, affiliation (if provided), address, city, state, zip code, and country. **No phone, facsimile, or e-mail address will be provided on the list.** To request a copy of this list, inquire at the AMS Registration Desk on-site.

BOX 1: SELECT ONE OF THE FOLLOWING **AFFILIATION TYPES** AND FILL IN ON THE REVERSE:

- GOVERNMENT
- PRIVATE SECTOR
- STUDENT
- UNIVERSITY

BOX 2: SELECT **REGISTRATION PACKAGE** AND YOUR **ATTENDEE TYPE** AND FILL IN ON THE REVERSE

ATTENDEE TYPE	FULL-WEEK PACKAGE includes: FULL-WEEK PACKAGE includes: Admittance to all conferences, all conference materials, all coffee breaks, formal poster viewing on Monday evening, and a Barn Dance BBQ ticket for Thursday evening.		ONE-DAY PACKAGE: includes: ONE CALENDER DAY PASS Admittance to all conferences and coffee breaks for one day. The Barn Dance BBQ ticket is NOT included.	
	By 21 June	22 June and Onsite.	By 21 June	22 June and Onsite.
AMS FULL MEMBER;; PROGRAM CHAIR & SESSION CHAIR	\$430	\$470	\$250	\$290
AMS ASSOC. MEMBER, NONMEMBER SPEAKER/POSTER PRESENTER*	\$470	\$510	\$250	\$290
NON-MEMBER	\$515	\$555	\$250	\$290
RETIRED MEMBER	\$200	\$240	\$90	\$130
AMS STUDENT MEMBER	\$175	\$215	\$60	\$100
STUDENT NON-MEMBER	\$205	\$245	\$90	\$130