



2005 Conference Registration
April 21-23, 2005
Renaissance Hollywood Hotel, Hollywood, Calif.

REGISTRANT INFORMATION

NAME _____

PUBLICATION / SCHOOL / ORGANIZATION _____

TITLE _____

E-MAIL _____ DAYTIME PHONE _____

ADDRESS FOR RECEIVING ACES MATERIAL:

ADDRESS _____ APT / SUITE _____

CITY / STATE / ZIP _____

MEMBERSHIP AFFILIATION

- ACES member * SND member (proof required) Non-member

* You may enroll as an ACES member at the same time you register, qualifying for the membership rate.
 Go to www.copydesk.org/membership.htm for forms and information.

REGISTRATION RATES

	EARLY (postmarked by 2/1/05)	MAIL-IN (postmarked by 3/14/05)	ON-SITE (by mail or in person after 3/14/05)	TOTAL
<input type="checkbox"/> ACES member	\$150	\$210	\$295	\$ _____
<input type="checkbox"/> Non-member	\$325	\$385	\$475	\$ _____
<input type="checkbox"/> Student member	\$85	\$105	\$160	\$ _____
<input type="checkbox"/> Student non-member	\$130	\$150	\$200	\$ _____
<input type="checkbox"/> Ticket to Saturday night party at The Highlands nightclub			\$25	\$ _____
Total payment enclosed:				\$ _____

METHOD OF PAYMENT

Payment in U.S. funds must accompany registration form. If your organization is paying, please have your accounting department indicate on its check whom the fee covers. ACES' tax number is 11-3390739. **No refunds after March 14.**

- Check Money order (Make payable to ACES)
- Visa MasterCard American Express

Name on card _____

Credit card # _____

Expiration _____ Signature _____

Mail form and payment to: ACES Administrator Carol DeMasters
 38309 Genessee Lake Road, Oconomowoc, WI 53066

CONFERENCE EVENTS

The three-day registration fee covers all workshops as well as the Thursday night opening reception and the Friday night banquet. Please indicate your attendance and any special needs:

- Opening reception (Thursday night)
- Banquet (Friday night)

I have special dietary needs (vegetarian, kosher, etc.): _____

I have special physical needs: _____