

ata Conference Registration

50th Annual Conference
of the American Translators
Association

New York
Marriott Marquis
New York City
October 28-31, 2009

Join ATA & Save

Receive discounted registration fees as well as 3 months free membership when you register for the conference and join ATA at the same time!

To take advantage of this special offer, complete the application on the reverse side.

Cancellation Policy

Cancellation requests received in writing by October 16, 2009 are eligible for a refund, subject to a \$25 administrative fee. Refunds will not be honored after October 16, even in the case of program changes or session and event cancellations.

3 Ways to Register

Register online at
www.atanet.org/conf/2009

Fax registration form to
+1-703-683-6122

Mail registration form to
ATA, 225 Reinekers Lane,
Suite 590, Alexandria,
Virginia 22314 USA

Don't Forget

Include payment with form
Make your hotel reservations
Tell a friend about this event

Last Name	First Name	Middle	ATA Membership#
Employer/School (Only list employer or school if you want it to appear on your badge.)			
Street Address (<input type="checkbox"/> Please indicate if this is a new address.)			Apt/Suite
City	State/Province	Zip/Postal Code	Country
Telephone	Fax	Email	

Optional: Provide onsite contact information to appear in the List of Attendees (email or phone)

This will be my first time attending an ATA Annual Conference

Registration Fees	ATA Member	Nonmember	ATA Student
Early Registration (until Sept. 25):	<input type="checkbox"/> \$325	<input type="checkbox"/> \$445	<input type="checkbox"/> \$160
One-day (indicate day _____):	<input type="checkbox"/> \$165	<input type="checkbox"/> \$225	N/A
Standard Registration (after Sept. 25):	<input type="checkbox"/> \$390	<input type="checkbox"/> \$535	<input type="checkbox"/> \$180
One-day (indicate day _____):	<input type="checkbox"/> \$195	<input type="checkbox"/> \$270	N/A
Late Registration (after Oct. 16):	<input type="checkbox"/> \$470	<input type="checkbox"/> \$640	<input type="checkbox"/> \$210
One-day (indicate day _____):	<input type="checkbox"/> \$235	<input type="checkbox"/> \$320	N/A

Preconference Seminar Fees					
<input type="checkbox"/> Seminar A	9am-12noon	\$50	<input type="checkbox"/> Seminar J	9am-12noon	\$50
<input type="checkbox"/> Seminar B	9am-12noon	\$50	<input type="checkbox"/> Seminar K	9am-12noon	\$50
<input type="checkbox"/> Seminar C	9am-12noon	\$50	<input type="checkbox"/> Seminar L	2-5pm	\$50
<input type="checkbox"/> Seminar E	9am-12noon	\$50	<input type="checkbox"/> Seminar M	2-5pm	\$50
<input type="checkbox"/> Seminar F	9am-12noon	FREE	<input type="checkbox"/> Seminar N	2-5pm	\$50
<input type="checkbox"/> Seminar G	9am-12noon	\$50	<input type="checkbox"/> Seminar O	2-5pm	\$50
<input type="checkbox"/> Seminar H	9am-12noon	\$50	<input type="checkbox"/> Seminar P	2-5pm	\$50
<input type="checkbox"/> Seminar I	9am-12noon	\$50	<input type="checkbox"/> Seminar Q	2-5pm	\$50
			<input type="checkbox"/> Seminar R	2-5pm	\$50
			<input type="checkbox"/> Seminar S	2-5pm	\$50
			<input type="checkbox"/> Seminar T	2-5pm	\$50
			<input type="checkbox"/> Seminar U	2-5pm	\$50
			<input type="checkbox"/> Seminar V	2-5pm	\$50
			<input type="checkbox"/> Seminar W	9am-12noon	\$50

Special Event Fees	
<input type="checkbox"/> LTD Networking Dessert Reception , Wednesday 7:30-8:30pm \$40 per person x _____ = \$ _____	<input type="checkbox"/> ID Networking Hour and Reception Thursday 7-8pm \$45 per person x _____ = \$ _____
<input type="checkbox"/> TCD Dessert Reception , Wednesday 7:30-8:30pm \$40 per person x _____ = \$ _____	<input type="checkbox"/> PLD Networking Reception , Friday 7-8pm \$40 per person x _____ = \$ _____

Proceedings, Paperback Format \$35 per copy x _____ = \$ _____
All attendees receive the Proceedings in CD format, including session handouts and more.

Conference DVD-ROM \$99 each x _____ (add \$12 for shipping and handling) = \$ _____
This special price is offered only to attendees who pre-order. To learn more, visit www.atanet.org/conf/2009/dvdrom.

Payment GRAND TOTAL = \$

<input type="checkbox"/> Credit Card: <input type="checkbox"/> VISA <input type="checkbox"/> MasterCard <input type="checkbox"/> AMEX <input type="checkbox"/> Discover	<input type="checkbox"/> Check/Money Order: Make payable through a U.S. bank in U.S. funds to ATA.
Credit Card Number _____ Verification Code _____ Expiration Date _____	Check Number: _____
Name on Card _____ Signature _____	Check Amount: _____

Please indicate if you require special accessibility or assistance and attach a sheet with your requirements.



Membership Application
for the American Translators Association

Special Offer for Attendees of the 50th Annual Conference

Get 15 Months of ATA Membership for the Price of 12!

(Oct 2009-Dec 2010)

Join ATA & Save

Receive discounted registration fees as well as 3 months free membership when you register for the conference and join ATA at the same time!

ATA Membership

To learn more about ATA membership, visit www.atanet.org or contact ATA at ata@atanet.org or +1-703-683-6100.

Dues are non-refundable and non-transferable.

Dues are not deductible as a charitable contribution for federal tax purposes, but may be deductible as a business expense.

If applying for ATA Membership, please provide this additional information:

Last Name First Name

Website Address

Native Language Native Country

I am a U.S. Citizen or permanent resident of the U.S. Yes No

Applicant's Signature

Please check this box if you have ever been an ATA member.

Print the letter of your last name under which you wish to be listed in the online Membership Directory: _____

Do not include my information on lists rented to qualified advertisers.

Do not list the following in the online Membership Directory:

Do not send me ATA broadcast announcements via email. (Does not include payment confirmations or receipts.)

- Telephone Number
- Fax Number
- Email Address

The publication cost of *The ATA Chronicle* magazine for one year (\$43) is included in membership dues.

If applying for Corporate, Institutional, or Joint Membership, please provide the following information:

Name of Corporation or Institution

Name of Contact Person Title

I hereby apply for ATA Membership:

- Associate Membership, \$145 \$_____
- Student Membership, \$80 (proof of student status required) \$_____
- Corporate Membership, \$300 \$_____
- Institutional Membership, \$180 (proof of nonprofit status required) \$_____
- Joint Membership, \$380 (Individual & Corporate Membership combined) \$_____

I also apply for the following division(s) at no additional cost:

- Chinese Language Division Literary Division
- French Language Division Medical Division
- German Language Division Nordic Division
- Interpreters Division Portuguese Language Division
- Italian Language Division Slavic Languages Division
- Japanese Language Division Spanish Language Division
- Korean Language Division Translation Company Division
- Language Technology Division

International Postage for Non-U.S. Residents:

- Countries *except* Canada & Mexico, \$35 \$_____
- Canada & Mexico *only*, \$15 \$_____

Membership Directory: (optional)

- Printed* 2010 Membership Directory, \$25 \$_____
- The *online* Membership Directory is free to all members and is continuously updated and available throughout the year.

Note: Corporate and Joint members will receive a complimentary copy of the printed Membership Directory.

Total Membership Dues (Add membership dues to Conference Registration Form on reverse side) = \$