



# Professional Aviation Safety Specialists, AFL-CIO 2009 Convention Pre-Registration Form August 10–12, St. Louis, Missouri

*This form is solely for the purpose of registering your attendance at the convention. You **must** make your own travel and hotel arrangements.*

Membership Status:       Active       Associate       Retired

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Name to Appear on Badge (if different from above): \_\_\_\_\_

Chapter: \_\_\_\_\_ Email Address: \_\_\_\_\_

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

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

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

Shirts (Please select a style and size):       Men's       Women's  
 S       M       L       XL       XXL       XXXL

**To be eligible for early registration, you must return this form with full payment by May 15, 2009.** In an effort to encourage early registration and ensure we meet our contractual agreements with the convention hotel, members and guests registering after May 15, 2009, will be charged a \$20 increased fee. Registration fees\* are as follows:

- PASS Member Early Registration (before May 15, 2009):      \$65.00
- Guest/Spouse Early Registration (before May 15, 2009):      \$30.00
- Child (18 and under) Early Registration (before May 15, 2009):      Free

*\*This fee includes access to all general sessions, welcome reception, conference materials and hotel amenities. However, after May 15, 2009, we cannot guarantee availability of all amenities.*

Please list the names of all attendees you are registering (including yourself).

Member Name: \_\_\_\_\_ Registration Fee: \_\_\_\_\_

Name: \_\_\_\_\_ Registration Fee: \_\_\_\_\_

Name: \_\_\_\_\_ Registration Fee: \_\_\_\_\_

Name: \_\_\_\_\_ Registration Fee: \_\_\_\_\_

Name: \_\_\_\_\_ Registration Fee: \_\_\_\_\_

Total Amount Enclosed: \_\_\_\_\_

**Please mail form with check or money order payable to PASS to:**

**1150 17th Street NW, Suite 702  
Washington, DC 20036  
Attn: Convention Registration**