

**USPA Conference 2010 Hotel/ Rates/Reservations**

The **InnPlace Hotel** and Conference Center, 9700 Bluegrass Parkway Louisville, KY 40299, is located minutes away from the Louisville International Airport, diverse dining, shopping, and entertainment and ample parking.

Ask for the special USPA rate (\$74/night double occupancy plus tax) and meal budget plan\*

\* This rate is **ONLY AVAILABLE UNTIL 3:00 p.m. July 1<sup>st</sup>, 2010**

After that time regular rates will apply if space is available.

**Hotel reservations: 1 502- 491- 4830**

**Registration Form: Please return this form to: USPA 409 Marquette Dr. , Louisville, KY 40222**

Name \_\_\_\_\_ Phone \_\_\_\_\_

Street Address \_\_\_\_\_ Email: \_\_\_\_\_

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

**Full conference fees include: all presentations, exhibitors hall, bookstore, wine / cheese social & banquet Workshops are a separate item. Please circle the appropriate fee**

<b>If postmarked before</b>	<b>May 30th</b>	<b>July 1st</b>	<b>After July 1st or at the door</b>		
<b>USPA member/Family</b>	<b>\$215 / 365</b>	<b>\$255 / 445</b>	<b>\$280 / 495</b>	<b>\$ _____</b>	<b>( A )</b>

**\* Membership(s) required to attend conference & workshops. Please circle one fee**

General: (single)	\$35 - (1 yr)	\$ 90 (3 yrs)	\$140 (5 yrs)		
Family: (Max 4 related persons at one address. Please submit separate sheet with additional names.)					
(No Firms or Assn.)	\$75 - (1 yr)	\$190 (3 yrs)	\$260 (5 yrs)		
Student (Full time) / Military	\$20 - (1-yr)			<b>\$ _____</b>	<b>( B )</b>

**Daily Fees (do not include special or social events)**

<b>Single full day lectures</b>	<b># _____ @ \$100 = _____</b>	
<b>Single lecture</b>	<b># _____ @ \$ 25 = _____</b>	
<b>Banquet dinner</b>	<b># _____ @ \$ 30 = _____</b>	<b>\$ _____ ( C )</b>

**Workshops and special events - separate fees: \$40 each 3 hr session**

Session #1 Sun p.m. (7 - 10 p.m,	# _____ @ \$ 40 = _____	
Session #2 Mon a.m. (9 - Noon)	# _____ @ \$ 40 = _____	
Session #3 Mon p.m. (1:30 - 4:30 p.m.)	# _____ @ \$ 40 = _____	<b>\$ _____ ( D )</b>

Phone: **USPA Office: (502) 429-6600** Fax: **USPA Office (502) 429-4924** \_\_\_\_\_ ( A )  
 Email: **uspsychotronics@aol.com** \_\_\_\_\_ ( B )

**Fees in U.S. dollars only - payable to USPA** \_\_\_\_\_ ( C )  
 \_\_\_\_\_ ( D )

**Please charge to (circle):** **VISA** **Mastercard**

<b>Total Due</b>	<b>\$ _____</b>
<b>Paid w/ Reg.</b>	<b>\$ _____</b>
<b>Bal Due (or Ref)</b>	<b>\$ _____</b>

**Signature** \_\_\_\_\_

**Card No:** \_\_\_\_\_

**Exp. date** \_\_\_\_\_ **Check enclosed #** \_\_\_\_\_

**Office only: Banquet ticket #** \_\_\_\_\_

**Initial** \_\_\_\_\_ **Date** \_\_\_\_\_

**Office only: CCV#** \_\_\_\_\_