

Monday through Thursday | November 6-9, 2017 | Renaissance Austin Hotel | Austin, Texas USA

To register for Hygienix™ 2017, please complete the form below. Copy this form for additional registrations, or register online at www.inda.org. By registering early you qualify for significant savings from the regular registration fee.

Last Name/Surname _____ First Name _____
 Your Title _____ Organization _____
 Address _____ Website _____
 City _____ State _____ Zip _____ Country _____
 Phone _____ Fax _____ Email _____

INDA will publish your email address on the official event attendee list. If you do not wish to have your email address published, please check the box.

Please make selections in each section for us to process your registration.

Your Organization's Primary Affiliation with the Nonwovens Industry (check all that apply):

- Nonwoven Producer/Supplier
- Converter/Fabricator/End Product Manufacturer
- Brand Owner/Brand Marketer
- Machinery/Equipment Manufacturer/Supplier
- Supplier of Adhesives, Binders & Chemicals
- Supplier of Resins, Fibers & Pulps
- Supplier of Paper & Packaging
- Supplier of Other Materials (Films, Tapes, Netting)
- Supplier of Services (Transportation, Logistics, Software)
- Wholesaler/Retail Distributor
- Third Party Testing, R&D, Pilot Lines
- Consulting
- Association
- Academic Institution
- Government
- Press/Publishing
- Other

Primary Title or Job Function (check only one):

- Principal/CEO/President/Senior Leadership
- New Business/Product Development/Tech. Scout
- Director/Division Management
- Manufacturing/Production/Operations Management
- Quality Control/Assurance Engineering
- Research & Development
- Purchasing
- Account Manager/Sales Management
- Consultant
- Marketing/Product Management
- Engineering/Applications/Process
- Financial Accounting/Comptroller/Business Analyst
- Office Manager/Administrative Assistant
- Human Resources
- Information Systems
- Press/Editorial
- Press/Other than Editorial
- Government
- Academic – Faculty
- Academic – Student

REGISTRATION FEES*

(Please check boxes)

- Full Registration**
- Network Registration** (Coffee Breaks and Receptions Only)
- Welcome Reception, Monday, November 6 (RSVP Required)**
- Dine with Industry Thought Leaders, Tuesday Evening** (Space is limited.)
- Adult Incontinence Workshop, Monday, November 6, 1–5:00 pm**

Before October 2, 2017		After October 2, 2017	
INDA Members	Non-Members	INDA Members	Non-Members
<input type="checkbox"/> \$1,645	<input type="checkbox"/> \$2,350	<input type="checkbox"/> \$1,975	<input type="checkbox"/> \$2,825
<input type="checkbox"/> \$595	<input type="checkbox"/> \$845	<input type="checkbox"/> \$715	<input type="checkbox"/> \$995
<input type="checkbox"/> \$0	<input type="checkbox"/> \$0	<input type="checkbox"/> \$0	<input type="checkbox"/> \$0
<input type="checkbox"/> \$150	<input type="checkbox"/> \$150	<input type="checkbox"/> \$150	<input type="checkbox"/> \$150
<input type="checkbox"/> \$150	<input type="checkbox"/> \$150	<input type="checkbox"/> \$150	<input type="checkbox"/> \$150

*** REGISTER 3 OR MORE FOR FULL REGISTRATIONS AND SAVE!**

\$100 per person off full registration fee. Attendees must be from the same company and use this mail/fax registration form. For each attendee, complete and submit a copy of this registration form.

PAYMENT (full payment must accompany this registration)

- MasterCard
- VISA
- AMEX
- Check / Money Order (in U.S. funds drawn on U.S. Bank, payable to INDA)

Total Enclosed \$ _____ Card # _____ Card Expires (Month): _____ (Year): _____

Signature: _____ CVV: _____

- Wire Transfer** (for instructions, please contact Tracie Leatham, tleatham@inda.org, or call +1 919 459 3726)
For all wire transfers, please reference Hygienix™ 2017 and attach confirmation.
- Please check here if you have a disability that requires special assistance or accommodation to fully participate.
NOTE: Please attach a written description of your needs. INDA must receive all special assistance requests by October 2, 2017 in order to accommodate.

PLEASE NOTE: By registering for Hygienix™ 2017, you are agreeing to receive email and direct mail communications from INDA, and you are also giving us permission to use your image in any photography promoting the event and our association.

Pre-register online at www.inda.org.

Or, send this form with payment or credit card information to the following address →

Hygienix™ 2017 / INDA
 PO Box 1288, Cary, NC 27512-1288
 Phone: +1 919 459 3726
 Fax: 866 847 7922 or 919 636 7908
tleatham@inda.org

NOTE: Cancellations must be in writing and received by INDA before October 2, 2017. No refunds for cancellations received after October 2, 2017.

