REGISTRATION FORM



Expo: November 9-10, 2016 Conference: Nov					'	,	
o register for Filtration 2016, please complete the form below. Copy this fearly, you qualify for significant savings from the regular registration fee. Last Name/Surname		Organization					
Job Title							
Address							
City State	Zip Country						
Telephone Fax INDA will publish your email address on the official event a							
Please make selections in each section for us to process	, 3						
	lms, Tapes, Nettir tation, Logistics, '	Association as, Tapes, Netting) Academic Institution Government Press/Publishing			The Filtration app will match your interests to select Exhibitors. Check the categories below to be introduced. Adhesives/Binders/Sealants/Resins. Fibers Ultrasonics/Hot Melt/Welding. Netting/Plastic/Metal. Machinery/Pleating/Other. Supplier of Fibers, Pulps, etc Converting/Cutting/Coating. New Business Development		
 New Business/Product Development/Tech. Scout □ Director/Division Management □ Manufacturing/Production/Operations Management □ Quality Control/Assurance Engineering □ Research & Development □ Purchasing □ Human 	ng/Product Managem	ient icess oller/Business An	☐ Press/☐ Press/☐ Goveri	'Other than Editoria	□ Laminate/Fili □ Media/Memb . □ Plastics/Addi	ms ranes/Roll Goods	
Registration Fees*		Through October 3 October 4-17			After October 17		
	INDA Members	Non- Members	INDA Members	Non- Members	INDA Members	Non- Members	
INDA Filter Media Training Course (separate fee required) Tuesday 8:30 am – Wednesday 10:30 am	□ \$ 1,595	□ \$ 2,295	□ \$ 1,595	\$ 2,295	Registration	Closed	
Filtration Conference & Expo	\$ 399	□ \$ 569	□ \$ 479	□ \$ 679	□ \$ 529	5 739	
Filtration Expo Only 2 Day (Wednesday & Thursday)	□ \$ 70	□ \$ 70	□ \$ 80	□ \$ 80	\$ 100	□ \$ 100	
* Conference & Expo Fee includes admission to the conference an Filtration Show Directory.	d admission to the 2-	day Expo, admiss	ion to the Wednes	sday reception, con	nference proceedir	ngs and the	
Payment (full payment must accompany this registration	ion) :/Money Order (in U						
		Card Expires / CVV Code					
			Card I	Expires/.	C V V CC		
			Card (Signa	Expires/. (month) ture	(year)		
Total Enclosed \$ Card #	eatham, tleatham@		Signa	ture	(year)		
Total Enclosed \$ Card # Billing Zip Code Phone or Email _ Wire Transfer (for instructions, please contact Tracie L	eatham, tleatham@ confirmation. special assistance	ainda.org, or ca	Signa all + 1 919 459 3 ation to fully pa	ture 3726) rticipate.			

NOTE: Cancellations must be in writing and received by INDA before October 3, 2016. No refunds for cancellations received after October 3, 2016.

Pre-register online at inda.org or send this form with payment or credit card information to the following address: $\frac{1}{2} \left(\frac{1}{2} \right) = \frac{1}{2} \left(\frac{1}{2} \right) \left(\frac{1$

Filtration 2016

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