



VISION: IRI ANNUAL MEETING 2017 - REGISTRATION FORM
 September 24-26, 2017
 (Please complete one form per attendee)

Name: _____

Badge Name: _____

Title: _____

Company: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Pursuant to the Americans with Disabilities Act, please list specific aids or services you may require:

REGISTRATION FEES	Earl Bird Special (On or before April 24)	Early (April 25-June 26)	Preferred (June 27-Aug 24)	Full (After Aug. 25)
IRI Member	<input type="checkbox"/> \$895.00	<input type="checkbox"/> \$995.00	<input type="checkbox"/> \$1,095.00	<input type="checkbox"/> \$1,195.00
Non-Member	<input type="checkbox"/> \$2,095.00	<input type="checkbox"/> \$2,195.00	<input type="checkbox"/> \$2,295.00	<input type="checkbox"/> \$2,395.00

PAYMENT:

- Check (payable to the Insured Retirement Institute)
- System Credit: Partial payment due, credit on account _____ Existing Credit Amount + _____ Balance Due
- Please bill my credit card: Visa MasterCard American Express

Card # _____ Exp. Date _____ CVV _____

Name on credit card and billing address (include zip code) where you receive your credit card statement
 (If different from above):

Signature: _____

Cancellation Policy

Cancellations must be sent in writing to IRI by fax or email to conferences@irionline.org. Requests received by June 23, 2017 will receive a full refund less a \$50 non-refundable processing fee. Cancellation requests received after June 23rd and before August 24th will be issued a 50% refund less a \$50 non-refundable processing fee. No refunds will be issued after August 25, 2017.

Substitution Policy

In the event the registrant is unable to attend, another person from the same company who is not already registered for the conference may be substituted without penalty. Please request a transfer by emailing conferences@irionline.org. Please provide the name of the attendee no longer able to attend along with contact information for the substitute attendee.