

**SATRO® 20**  
**April 12-13, 2018**  
**Atlanta, Georgia**  
**Conference Registration Form**



Please Print. Additional registrants may be included on a separate sheet.  
 Complete contact information is important for each registrant, including an e-mail address.  
 Please print exactly as you would like your information listed in all **SATRO® 20** publications.

The 2018 registration fee is \$320.00 for all who did not attend the 2017 SATRO® conference in Orlando.

Those who did attend the 2017 conference receive a \$25 discount from the registration fee, paying \$295.00.

A full refund, less a \$75.00 processing fee per person, will be made for cancellations received by March 23, 2018. Due to financial commitments made to our host hotel, no refund requests received by us after that date will be honored. However, upon notification up to 72 hours prior to the conference, substitutions will be allowed at no additional charge, if the registrant is employed by the same company. No other substitutions will be allowed for cancellations. Pre-registration is required and may not be available on site. A late registration fee of \$75 applies after March 23, 2018.

Registrants:

1.) NAME: \_\_\_\_\_  
 EMAIL: \_\_\_\_\_  
 PHONE: \_\_\_\_\_

2.) NAME: \_\_\_\_\_  
 EMAIL: \_\_\_\_\_  
 PHONE: \_\_\_\_\_

3.) NAME: \_\_\_\_\_  
 EMAIL: \_\_\_\_\_  
 PHONE: \_\_\_\_\_

4.) NAME: \_\_\_\_\_  
 EMAIL: \_\_\_\_\_  
 PHONE: \_\_\_\_\_

**REGISTRATION FEES**

**1st Registrant:**  
 Fee: \$320 new/\$295 continuing\*  
 Total: \$ \_\_\_\_\_

**2nd Registrant:**  
 Fee: \$320 new/\$295 continuing\*  
 Total: \$ \_\_\_\_\_

**3rd Registrant:**  
 Fee: \$320 new/\$295 continuing\*  
 Total: \$ \_\_\_\_\_

**4th Registrant:**  
 Fee: \$320 new/\$295 continuing\*

*(For additional registrants, use an additional registration form)*

**Total Registration Fees: \$ \_\_\_\_\_**

\* continuing rate applies only to those who attended SATRO®19 in 2017.

COMPANY INFORMATION FOR ALL REGISTRANTS:

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_  
 State: \_\_\_\_\_ Zip \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax \_\_\_\_\_

**Payment Method:**

**Check:** Make your check payable to SATRO® and mail to the address listed below.  
**Credit Card:** Scan and E-mail your payment to [mysatro@aol.com](mailto:mysatro@aol.com).

**CREDIT CARD:** \_\_\_ Visa \_\_\_ Master Card \_\_\_ Discover (AMEX is not an option at this time)

Card # \_\_\_\_\_ Exp. Date \_\_\_\_\_ Security Code# on back \_\_\_\_\_

Name on Card: \_\_\_\_\_ Address \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Cardholder  
 Ph# \_\_\_\_\_ Cell Phone# \_\_\_\_\_

ELECTRONIC RECEIPTS WILL BE SENT TO THE REGISTRANT'S E-MAIL FOLLOWING COMPLETION OF THE REGISTRATION PROCESS. PLEASE CONTACT US IF YOU NEED A RECEIPT SOONER THAN TEN (10) BUSINESS DAYS FOLLOWING REGISTRATION.

MEETING REGISTRATION EXTENDS YOUR PERMISSION TO SATRO® TO USE YOUR PICTURE ON THE SATRO® WEBSITE.

SATRO®  
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