

# Convention Registration Form

**FORM ONE**

Promo Code: \_\_\_\_\_

**Yes!** I want to advance my career. Please process my ALOA 2009 Registration Form. I understand that ALOA 2009 is a public event and that I may be photographed while attending classes, the Security Expo, and related events.

**Please type or print your information**

ALOA Member # \_\_\_\_\_  
 SAVTA Member # \_\_\_\_\_  
 Non-Member  
 PRP/STPRP Status:  RL  CRL  CPL  CML  CPS  CMST  
 Is this your first ALOA Convention?  Yes  No

**Registrant:**

First Name \_\_\_\_\_ MI \_\_\_\_\_  
 Last Name \_\_\_\_\_  
 Name for Badge \_\_\_\_\_  
 Company Name \_\_\_\_\_  
 Street or PO Box \_\_\_\_\_  
 City \_\_\_\_\_  
 State or Providence \_\_\_\_\_  
 Zip/Postal Code \_\_\_\_\_  
 Country \_\_\_\_\_  
 Work Number \_\_\_\_\_  
 Home Number \_\_\_\_\_  
 Fax Number \_\_\_\_\_  
 E-mail \_\_\_\_\_  
 Is this an address change?  Yes  No

**Non-locksmith Guests** (complete only if attending)

First/Last Name: \_\_\_\_\_  
 First/Last Name: \_\_\_\_\_

**FORM OF PAYMENT:**

Check Number \_\_\_\_\_  
 Charge:  MasterCard  Visa  Discover  American Express  
 Card Account Number: \_\_\_\_\_  
 Card Expiration Date: \_\_\_\_\_  
 Print Name: \_\_\_\_\_  
 Signature: \_\_\_\_\_

**PACKAGES/INDIVIDUAL CLASSES**

	By July 7	After July 7	
<b>Jackpot Package</b>			
<input type="checkbox"/> Member	\$765	\$865	= _____
<input type="checkbox"/> Nonmember	\$1095	\$1195	= _____
<b>Royal Flush Package</b>			
<input type="checkbox"/> Member	\$545	\$645	= _____
<input type="checkbox"/> Nonmember	\$795	\$895	= _____
<b>Full House Package</b>			
<input type="checkbox"/> Member	\$195	\$245	= _____
<input type="checkbox"/> Nonmember	\$320	\$370	= _____
<b>Individual Full-Day Classes</b>			
<input type="checkbox"/> Member	\$245	\$295	= _____
	x____(# days)	x____(# days)	= _____
<input type="checkbox"/> Nonmember	\$385	\$445	= _____
	x____(# days)	x____(# days)	= _____
<b>Individual Half Day Classes</b>			
<input type="checkbox"/> Member	\$95	\$120	= _____
	x____(# days)	x____(# days)	= _____
<input type="checkbox"/> Nonmember	\$135	\$160	= _____
	x____(# days)	x____(# days)	= _____
<b>Bonus Sunday Class</b>			
<input type="checkbox"/> With Package	\$135	\$185	= _____
<input type="checkbox"/> Without Package	\$245	\$295	= _____

**IF PAYING BY CHECK** Send registration forms 1, 2, and 3 with your check to: ALOA, P.O. Box 972143 • Dallas, TX 75397-2143

**IF PAYING BY CREDIT CARD** Send registration forms 1, 2, and 3 with your credit card information to: ALOA • 3500 Easy Street • Dallas, TX 75247 -or- FAX registration forms 1, 2, and 3 with your credit card information to: ALOA 214.819.9736

**EXPO, MEETINGS, EVALUATIONS AND EVENTS**

	By July 7	After July 7
<b>EXHIBITS ONLY</b>		
<input type="checkbox"/> Member	FREE	\$10 _____
<input type="checkbox"/> Nonmember	\$20	\$30 _____
<input type="checkbox"/> Non-Locksmith/Guest	\$5	\$10 _____

**PRP AFTER CLASS ELECTIVE TEST—MEMBERS ONLY**

Check a box for each day that you will be taking a PRP elective test after the class:

<input type="checkbox"/> Sunday	\$10	\$20	_____
<input type="checkbox"/> Monday	\$10	\$20	_____
<input type="checkbox"/> Tuesday	\$10	\$20	_____
<input type="checkbox"/> Wednesday	\$10	\$20	_____
<input type="checkbox"/> Sunday	\$10	\$20	_____

**SATURDAY, AUGUST 15 • 6-10PM**

**PRP EVALUATION**

<input type="checkbox"/> Member	\$35	N/A	_____
<input type="checkbox"/> Nonmember	\$230	N/A	_____

**STPRP Evaluation, CPS**

<input type="checkbox"/> ALOA/SAVTA Member	\$80	N/A	_____
<input type="checkbox"/> Nonmember	\$275	N/A	_____

**STPRP Evaluation, CMST**

<input type="checkbox"/> ALOA/SAVTA Member	\$125	N/A	_____
<input type="checkbox"/> Nonmember	\$320	N/A	_____

**Dinner Banquet Only**

<input type="checkbox"/> With package (includes 1 ticket only)	\$50	=	_____
<input type="checkbox"/> Member/Nonmember	\$75 x _____	=	_____
<input type="checkbox"/> Child under 12	\$30 x _____	=	_____

**ALOA Open Golf Tournament**

<input type="checkbox"/> Golfer	\$150 x _____	=	_____
<input type="checkbox"/> Shirt Size _____			

**Fees and Materials**

**Lab Fees**

<input type="checkbox"/> 105, 118	\$200 x _____	=	_____
<input type="checkbox"/> 106, 110, 112, 318, 418	\$100 x _____	=	_____
<input type="checkbox"/> 108	\$50 x _____	=	_____
<input type="checkbox"/> 113, 313, 320, 408	\$75 x _____	=	_____
<input type="checkbox"/> 208, 420	\$40 x _____	=	_____
<input type="checkbox"/> 214	\$250 x _____	=	_____
<input type="checkbox"/> 304, 404, 804	\$20 x _____	=	_____
<input type="checkbox"/> 306	\$280 x _____	=	_____
<input type="checkbox"/> 319, 419	\$125 x _____	=	_____
<input type="checkbox"/> 406	\$175 x _____	=	_____
<input type="checkbox"/> 712	\$400 x _____	=	_____

**PRP Resource Guide**

<input type="checkbox"/> Member	\$20 x _____	=	_____
<input type="checkbox"/> Nonmember	\$30 x _____	=	_____

**Safe Technicians Reference Manual**

<input type="checkbox"/> Member	\$135	_____
<input type="checkbox"/> Nonmember	\$200	_____

**Membership RENEWAL** If applying for NEW membership, please complete the application (Form 5)

**Annual Dues**

<input type="checkbox"/> Active/Allied Member (US/US Territories)/Prob.Mem (MEM1)	\$155	_____
<input type="checkbox"/> Int'l Member (MEM2)	\$130	_____
<input type="checkbox"/> Retired Member (MEMR)	\$40	_____
<input type="checkbox"/> Canadian Air Mail (AIR1)	\$20	_____
<input type="checkbox"/> Overseas Air Mail (AIR2)	\$50	_____

**Application Fee (APPL)**

\$50 (WAIVED)

**TOTAL AMOUNT:**

PAYABLE IN U.S. FUNDS ONLY!

\$ \_\_\_\_\_