



IABC 2008 China ~ March 25-26, 2009
SPONSOR'S REGISTRATION FORM

COMPLIMENTARY REGISTRATION
MAXIMUM TWO PER SPONSORS

Company: _____
Name: _____
Title: _____
Badge Name: _____
Street: _____
P.O. Box _____ Mail Code: _____ CIMS code: _____ Suite: _____
City: _____ State/Province: _____ Zip Code: _____
Country: _____ Email: _____
Phone: _____ Fax: _____

I will attend the RECEPTION on: March 25
I will attend the CONFERENCE on: March 25 March 26
I wish to receive ADDITIONAL PROCEEDINGS: Number of copies _____ x \$628 per copy = \$ _____

FEE SCHEDULE FOR SPONSOR'S REGISTRANT:

Registration Fee is Complimentary

(Includes one copy of proceedings, coffee breaks, lunch (es), reception and access to the exposition)

PAYMENT METHODS *(All checks must be drawn from U.S. banks in U.S. funds only)*

Total Amount Submitted in US\$ _____

Make Check Payable to: Global Automotive Management Council (GAMC)

For Credit Card Payment: MasterCard VISA American-Express

Account #: _____ Expiration Date: _____

(Cardholder's name & billing address if different from the above)

Signature: _____ Date: _____

REFUND POLICY: NO REFUNDS after December 4, 2008. There is a 45% service charge on cancellation(s) before December 4, 2008.

Please return to: IABC, 166 South Industrial, Saline, MI 48176-9493, USA
Phone: 734 944 5850 Fax: 734 944 584 Email: info@bodycongress.com