



## 2019 AEA West Connect Conference Registration Form

Registrations will be accepted at AEA Headquarters until September 18.  
**Total payment is required with the registration form.** Upon your arrival at the AEA Registration Desk, you will receive your name badge. Please provide information below **for each individual in your party**. Names shown on badges will appear **EXACTLY** as they are entered below.

Attendee Name: \_\_\_\_\_  
 Company Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Address 2: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Country: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

<b>Meeting Registration:</b>	<i>AEA Member</i>	<i>Non-Member</i>
Sept 23 & 24 Meetings, Lunch & Exhibits	\$290 USD	\$380 USD
<b>Other Registration Options:</b>		
Sept 23 Only	\$185 USD	\$245 USD
Sept 24 Only	\$165 USD	\$205 USD
Guest For Sept 23 Exhibit Hall	\$50 USD	\$50 USD

**Additional Attendees:**

Name: \_\_\_\_\_ Registration Type: \_\_\_\_\_  
 Name: \_\_\_\_\_ Registration Type: \_\_\_\_\_  
 Name: \_\_\_\_\_ Registration Type: \_\_\_\_\_

- If you have additional attendees, please include a list with name and registration type for each.

**Additional Requests or Comments:**

**Payment Type:**                      Credit Card                      Check (make payable to Aircraft Electronics Association)

**Credit Card Information:**

Accepted Cards:

Card Number: \_\_\_\_\_

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

Billing Address: \_\_\_\_\_

Email for receipt: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ 3 or 4 Digit Security # on Card: \_\_\_\_\_

Amount to be Charged: \$ \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

If faxing, please complete form and fax to **816-347-8405**.  
 If mailing, please complete form and mail to: **AEA, 3570 NE Ralph Powell Road, Lee's Summit, MO 64064**  
 Any registration cancelations prior to Sept 18 will be charged \$50 service fee. **No refunds after Sept 18.**