



# 2013 AACRAO SEM Conference

## Corporate Participant Registration Form

10 – 13 November • Chicago, IL

Fax to: 301-694-5124  
Mail to: AACRAO - IV  
PO Box 37500  
Baltimore, MD 21297-3500  
Questions: 866-229-3691 or 301-694-5243  
Email: AACRAOSEM@experient-inc.com

Key Code: \_\_\_\_\_

Please print clearly.

First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Badge Name \_\_\_\_\_  
Title \_\_\_\_\_ E-mail \_\_\_\_\_  
Institution/Company \_\_\_\_\_ Telephone\* \_\_\_\_\_ Fax\* \_\_\_\_\_  
Address \_\_\_\_\_ Twitter Handle \_\_\_\_\_  
City \_\_\_\_\_ State/Province \_\_\_\_\_ ZIP/Postal Code \_\_\_\_\_ Country \_\_\_\_\_  
Emergency Contact Name \_\_\_\_\_ Phone \_\_\_\_\_ Alternate Phone \_\_\_\_\_  
Guest Name (Additional Fee) \_\_\_\_\_ Guest Badge Name \_\_\_\_\_

\*International registrants should list their country and city codes.

AACRAO considers anyone not affiliated with a college or university to fall into the Corporate Participant category and will review registrations and reclassify if necessary.

### Registration Fees:

Registration Category (Please indicate with an X)	By Oct 11	After Oct 11	On Site
CORPORATE MEMBER (not exhibiting, presenting or sponsoring)	<input type="checkbox"/> \$1400	<input type="checkbox"/> \$1500	<input type="checkbox"/> \$1550
CORPORATE NONMEMBER (not exhibiting, presenting or sponsoring)	<input type="checkbox"/> \$1700	<input type="checkbox"/> \$1800	<input type="checkbox"/> \$1850
CORPORATE PRESENTER Full Meeting (one per session) Session ID _____	<input type="checkbox"/> Complimentary		
EXHIBITOR/SPONSOR Complimentary (one per booth and/or sponsorship)	<input type="checkbox"/> Complimentary		
Additional Exhibitor/Sponsor/Corporate Presenter Paid Full Meeting Registration	<input type="checkbox"/> \$790		
Exhibitor Exhibit Hall Only (4 complimentary registrations per booth)	<input type="checkbox"/> Complimentary		
Exhibitor Exhibit Hall Only (per person above the 4 complimentary registrations) Includes Monday Celebration & Tuesday Lunch Tickets	<input type="checkbox"/> \$250		
GUEST registration for Spouses, Partners, Children 12 and over	<input type="checkbox"/> \$150		
GUEST registration for Children under 12	<input type="checkbox"/> \$75		

### Pre-conference Workshops (additional fee)

Workshop Title(s)	Workshop No.	Start Time	Fee

### Ticketed Events (included in registration fee, for planning purposes, indicate intention)

\*Indicates events only available to full meeting participants.

Evening Celebration Mon 6:00pm ☐ Yes, I'd like to attend. ☐ No, thank you.  
\*Continental Breakfast and Presentation Tues 7:30am ☐ Yes, I'd like to attend. ☐ No, thank you.  
\*Luncheon and Plenary Presentation Tues 12:30pm ☐ Yes, I'd like to attend. ☐ No, thank you.  
\*Continental Breakfast and Panel Presentation Wed 7:45am ☐ Yes, I'd like to attend. ☐ No, thank you.

### Optional Seminars (included in registration fee, for planning purposes, indicate intention)

Seminar for New SEM Professionals Wed 1:30pm ☐ Yes, I'd like to attend. ☐ No, thank you.  
Seminar for Experienced SEM Professionals Wed 1:30pm ☐ Yes, I'd like to attend. ☐ No, thank you.

### Payment Information (Please check one): Federal Tax ID: 52-2274900

☐ Check: # \_\_\_\_\_ ☐ VISA ☐ MasterCard ☐ American Express

Cardholder's Name: \_\_\_\_\_

Credit Card Number: \_\_\_\_\_ Exp. Date \_\_\_\_\_

Total Registration Fee \$ \_\_\_\_\_

Total Workshop Fee \$ \_\_\_\_\_

Total Amount to be Charged \$ \_\_\_\_\_

Office Use Only  
Date Received \_\_\_\_\_ Check # \_\_\_\_\_ Check Total \_\_\_\_\_  
Sheet Total \_\_\_\_\_ Date Entered \_\_\_\_\_ Entered by \_\_\_\_\_

### Special Interests (check all that apply)

☐ First Timer ☐ Presenter  
☐ Exhibitor ☐ Sponsor

### Organization Type (check only one)

☐ Educational Institution  
☐ Non-Profit Organization  
☐ Government Agency  
☐ Corporation/Consultant

### Institution Type (check only one)

☐ 4-Year Public ☐ 4-Year Private ☐ 2-Year  
☐ Graduate or Professional ☐ International  
☐ For Profit ☐ Other \_\_\_\_\_

### FTE Enrollment (check only one)

☐ Under 1,000 ☐ 1,000-2,499  
☐ 2,500-4,999 ☐ 5,000-9,999  
☐ 10,000-19,999 ☐ 20,000 + ☐ N/A

### Carnegie Classification (check only one)

☐ Doctoral/Research University  
☐ Baccalaureate/Associate's College  
☐ Master's College & University  
☐ Associate's College  
☐ Baccalaureate College-Liberal Arts  
☐ Specialized Institution  
☐ Baccalaureate College-General  
☐ Tribal College and University ☐ N/A

### Area of Responsibility (check all that apply)

☐ Enrollment Management ☐ Admissions  
☐ Records/Registration ☐ Financial Aid  
☐ Academic Advising ☐ Student Affairs  
☐ International Admissions ☐ Computer/IS  
☐ Institutional Research  
☐ Other \_\_\_\_\_

### Title (check only one)

☐ President/Chancellor  
☐ Provost/Chief Academic Officer  
☐ Vice President  
☐ Associate/Assistant Provost  
☐ Assoc/Assist Vice President/Chancellor  
☐ Director/Registrar  
☐ Associate/Assistant Director  
☐ Other \_\_\_\_\_

I'd like to learn more about joining an AACRAO committee. ☐ Yes ☐ No

### Meeting Attendance

Attended SEM in '12? ☐ Yes ☐ No  
# of SEM Conferences attended \_\_\_\_\_  
Attended Annual Meeting in '13? ☐ Yes ☐ No  
# of Annual Meetings attended \_\_\_\_\_  
Attended Tech Conf in '13? ☐ Yes ☐ No  
# of Tech Conferences attended \_\_\_\_\_  
Attended Transfer in '13? ☐ Yes ☐ No  
# of Transfer Conferences attended \_\_\_\_\_

### Special Meal Request

☐ Vegetarian ☐ Vegan  
☐ Food Allergy \_\_\_\_\_

### Special Service

☐ Attach a description of requirements if you have special needs.