



JERUSALEM + AMMAN + NICOSIA + BAGHDAD + DAMASCUS

## 2009 ASOR ANNUAL MEETING REGISTRATION

NOVEMBER 18–21 · NEW ORLEANS, LA

Register online starting in January at [www.asor.org/AM/index.html](http://www.asor.org/AM/index.html)

**MEMBER INSTITUTION NAME** \_\_\_\_\_

Check box if you have applied for membership in the past 10 days

Last Name \_\_\_\_\_ First Name \_\_\_\_\_

Institution (for name badge) \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Postal Code \_\_\_\_\_ Country \_\_\_\_\_

Home Tel. \_\_\_\_\_ Work Tel. \_\_\_\_\_ Fax No. \_\_\_\_\_ Email \_\_\_\_\_

### **REGISTRATION FEE [circle appropriate fee]:**

ASOR membership must be current to receive the member rate.

	<b>EARLY BIRD</b> (Jan. 1 – Apr. 4)	<b>SUPERSAVER</b> (Apr. 5 – Sept. 30)	<b>ADVANCE</b> (Oct. 1 – Nov. 8)	<b>ONSITE</b>
Member	\$125	\$135	\$165	\$200
Non-Member *	\$175	\$185	\$235	\$250
Student Prof. Member	\$60	\$80	\$95	\$110
Student at ASOR Member School	\$50	\$70	\$90	\$110
First-time Student Member **	\$25	\$45	\$60	\$85
Spouse/Partner **	\$80	\$90	\$125	\$150

Note: Paper presenters must be registered as a professional or student member.

Note: If you are retired and would like to apply for a partial scholarship, please email Kelley Bazydlo at [asorad@bu.edu](mailto:asorad@bu.edu).

\* Non-Member rate includes an ASOR associate membership.

\*\* Students at ASOR member schools who are first-time attendees also qualify for this special rate.

\*\*\* Spouse/Partner rate applicable only if member and spouse/partner register on the same form.

S/P name: \_\_\_\_\_ S/P institution: \_\_\_\_\_

### **PAYMENT:**

Please bill my  Mastercard  Visa for \$ \_\_\_\_\_

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

Expiration Date \_\_\_\_ / \_\_\_\_

Zip Code of Billing Address \_\_\_\_\_

Name of Card Holder \_\_\_\_\_

Signature \_\_\_\_\_

My check is enclosed in the amount of \$ \_\_\_\_\_

\* Cancellations are subject to a \$25 processing fee for refunds.

**TAX DEDUCTIBLE CONTRIBUTIONS:**  \$500  \$250  \$100 Other \$ \_\_\_\_\_

**Refund policy:** All refunds must be requested in writing by November 2, 2009. A \$35 administrative fee will be assessed per registration. No refunds will be given on the student or spouse/partner fees. Refunds may be processed after the meeting and will be issued by February 10, 2010.

### **MAIL FORM TO:**

ASOR at Boston University  
656 Beacon St., 5th floor  
Boston, MA 02215-2010

**FAX FORM TO:** 1-617-353-6575

### **QUESTIONS:**

Phone: 1-617-353-6570  
Email: [asormtgs@bu.edu](mailto:asormtgs@bu.edu)