

# Conference Registration

Submit by Email

Print Form

Magnetic Materials

Magnetizing & Testing

Magnetic Encoders

Conference Name: **Magnetics Workshop**

Conference Dates: **September 06, 2019**

Conference Location: **811 W. Square Lake Rd. Troy, MI.**

Alliance LLC  
1450 Clark Drive  
Valparaiso, Indiana 46385

Phone: 219-548-3799  
Fax: 219-548-7071

www.allianceorg.com

## Attendee Information

|                  |  |
|------------------|--|
| Name:            |  |
| Name (2):        |  |
| Name (3):        |  |
| Name (4):        |  |
| Company:         |  |
| Address:         |  |
| State/Province:  |  |
| Zip/Postal Code: |  |
| Country:         |  |

|               |  |
|---------------|--|
| Main Contact: |  |
| Email:        |  |
| Phone:        |  |

### Special Requests:

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## Registration Fees

|  |                 |
|--|-----------------|
| <b>Conference Fee: \$140.00 each or \$600.00 per 5</b> |                 |
| x Number of Attendees:                                 |                 |
| Subtotal:  |                 |
| Total Due:   |                 |
| <b>Payments must be received by:</b>                   | August 23, 2019 |

## Payment

- Check payable to:
- Credit Card
- American Express
  - Mastercard
  - Visa

|                  |  |
|------------------|--|
| Card Number:     |  |
| Expiration Date: |  |
| Cardholder Name: |  |

### NOTICE FOR PAYMENT:

Payment is preferred in company or personal check. If credit card payment is desired, please fax this form to 219-548-7071.

Or you may enter the card info at [www.paypal.me/allianceorg](http://www.paypal.me/allianceorg)

Or email to [brit@allianceorg.com](mailto:brit@allianceorg.com) for a link to enter your card information

Receipts will be emailed

Attendee information and attendance will remain confidential