

OAV 2009 Optical Symposium Registration Form October 17-18, 2009

Name _____

Company Name for Badge _____

Address _____

City _____ State _____ Zip _____

Daytime Phone _____

	Members	Non-Members	Sub Total
Both Days <small>Includes all classes on both days, breakfast both days, Saturday lunch</small>	<input type="checkbox"/> \$110.00	<input type="checkbox"/> \$140.00	_____
Saturday Only <small>Includes all Saturday classes, Saturday breakfast, lunch</small>	<input type="checkbox"/> \$90.00	<input type="checkbox"/> \$120.00	_____
Sunday Only <small>Includes all Sunday classes and Sunday breakfast</small>	<input type="checkbox"/> \$50.00	<input type="checkbox"/> \$80.00	_____
Students & Guests <small>Lunch fee for Saturday</small>	<input type="checkbox"/> \$25.00		_____
		Total:	_____

**Need to Renew Your Membership or Join
Renewal Dues or Membership Application**

Add: \$100.00 _____

Late Fee: \$20 After October 1st

Final Total: _____

Online Registration

Register online at the OAV website www.vaopticians.org.

Onsite Registration

Onsite registrations and those received after October 1, 2009 are subject to a \$20.00 late fee.

Cancellation/Refund Policy

Full refund until October 1, 2009.
No refunds after October 1, 2009 for any reason.

Hotel Reservations

Holiday Inn Central Park Place

Group Rate: \$ 75

564 Warrenton Road

Fredericksburg, VA

540.371.5500

Block Rate Ends 10/01/09

Mail Form with Payment to:

OAV, P.O. Box 2845, Staunton, VA 24402

Fax form to: 540-213-2102

Method of Payment: Check
(Payable to OAV)
 Visa MasterCard

Name on Credit Card

Credit Card #

Signature

Exp. date

If you wish to register using American Express or Discover, you must register online at www.vaopticians.org/register.htm.