FGS 2010 CONFERENCE REGISTRATION

Mail your completed form and payment to:

FGS 2010 Conference
P.O. Box 200940, Austin, TX 78720-0940
Phone: 1-888-347-1500 Email: office@fgs.org
Fax: 1-866-347-1350 Web: www.fgs.org

Space Planning

Please circle the sessions you plan to attend. You are not obligated to attend the sessions marked, but your assistance in planning is appreciated. Lectures in the brochure are coded with the numbers given below.

Wednesday August 18

W-101 W -102 W -103 W -104 W-105 W -106 W -107 W -108 W -109 W -110
W-111 W -112 W -113 W -114 W -115 W -117 W -118 W -119 W -120 W-121
W-122 W -123 W -124 W -125 W -126 W -127 W -128 W -129 W -130 W-131
W-132 W -133 W -134 W -135 W -136 W -137

Thursday August 19

T-201 T -202 T -203 T -204 T -205 T -206 T -207 T -208 T -209 T -214
T-215 T -216 T -217 T -218 T -219 T -220 T -221 T -222 T -223 T -224
T-225 T-226 T -227 T -228 T -229 T -230 T -231 T -232 T -233 T -234
T-235 T -236 T -237

Friday August 20

F-301 F- 302 F- 303 F- 304 F- 305 F- 306 F- 307 F- 308 F- 310 F- 311
F-312 F- 313 F- 314 F- 315 F- 316 F- 317 F- 318 F- 319 F- 320 F- 321
F-322 F- 323 F- 324 F- 325 F- 330 F- 331 F- 332 F- 333 F- 334 F- 335
F-336 F-337 F- 339 F- 340 F- 341 F- 342 F- 343 F- 344 F- 345 F- 346
F-347 F- 348 F- 349 F- 350 F-351 F-352 F- 353

Saturday August 21

S-401 S- 402 S- 403 S- 404 S- 405 S- 406 S-407 S- 408 S- 409 S- 410
S-411 S- 412 S- 413 S- 414 S- 415 S- 416 S- 417 S- 418 S- 419 S- 420
S-421 S- 426 S- 427 S- 428 S- 429 S- 430 S- 431 S- 432 S- 433 S- 434
S-435 S- 436 S- 437 S- 438 S- 439 S- 440 S- 441 S- 442 S- 443 S- 444
S-445 S- 446

Check all that apply:

___ 1st FGS Conference
___ Society Officer ___ Librarian
___ FGS Delegate ___ Archivist
(If Delegate - Society Name _____)

Special Meals and ADA Requests:

Vegetarian ___ Other (specify _____)
ADA Requirements (specify _____
_____)

VOLUNTEER – The volunteer chair will contact you.

- Check box if you want to be a volunteer before the conference…….☐
- Check box if you want to be a volunteer during the conference…… ☐
- Check if registering for Librarians Day (No Charge, includes Wednesday ProQuest sponsored luncheon)...……...…….☐

Full Conference Registration (Wed. through Sat.)	$185	$____
Single Day Registration (check one)		
___Wed. ___Thurs. ___Fri. ___Sat.	$99	$____
APG Professional Management Conference (APG member)* Tuesday, August 17	$155	$____
APG Professional Management Conference (non-member)* Tuesday, August 17	$175	$____

Registration (Postmarked after June 1, 2010):

Full Conference Registration (Wed. through Sat.)	$235	$____
Single Day Registration (check one)		
___Wed. ___Thurs. ___Fri. ___Sat.	$125	$____
APG Professional Management Conference (member & non-member)* Tuesday, August 17	$175	$____

Syllabus – A program syllabus CD is included free with registration. A printed copy can be purchased for an additional $30. $30 $____

Wednesday 18 August		**Qty.**
W-116	FGS Society Luncheon	___x $26 = $____
W-138	An Appalachian Evening	___x $20 = $____
Thursday 19 August		
T-210	BCG Luncheon	___ x $26 = $____
T-211	Friends of NARA—SE Luncheon	___ x $26 = $____
T-212	KHS Luncheon	___ x $26 = $____
T-213	NGS Luncheon	___ x $26 = $____
T-238	FGS Banquet (5:30 P.M. bus)	___ x $45 = $____
T-239	FGS Banquet (6:30 P.M. bus)	___ x $45 = $____
Friday 20 August		
F-309	Metes and Bounds Workshop	___ x $40 = $____
F-326	APG Luncheon	___ x $26 = $____
F-327	ISFHWE Luncheon	___ x $26 = $____
F-328	FamilySearch Luncheon	___ x $26 = $____
F-329	ETHS Luncheon	___ x $26 = $____
F-338	Township and Range Workshop	___ x $30 = $____
Saturday 21 August		
S-422	GSG Luncheon	___ x $26 = $____
S-423	ISBGFH Luncheon	___ x $26 = $____
S-424	NEHGS Luncheon	___ x $26 = $____
S-425	TSLA Luncheon	___ x $26 = $____

FGS *FORUM* subscription $15/1 yr. $15 = $____
or $25/2 yr. (circle one) $25 = $____
1812 Documents Digitization Project (Stern-NARA Gift Fund) donation $____
I want to become a Friend of FGS by making a donation $____

Total Payment: _____

Cancellation Policy: Full refund (minus $50 service fee) granted upon request prior to July 1, 2010

Please print name as it should appear on the conference name tag. Use a separate form for each person. This form may be duplicated.

Name: _____
First Name Middle/Maiden Last Postnominals (18 character limit)

Street Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ E-mail: _____

Make checks payable to: **FGS 2010 Conference.** If paying by **credit card:** (please circle) Visa, Master Card or Discover.

Credit Card Number: _____ Expiration Date: _____

Name as it appears on card: _____ Authorized Signature: _____