November 5, 2011–Marriott Hotel, Long Beach, CA

26th Annual IDAC Fall Symposium

REGISTRATION FORM

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE _____ FAX _____

E-MAIL _____

___ ***I wish to attend the 2011 IDAC Fall Symposium***

2011 IDAC Member Registration by October 28, 2011	**FREE**
On-Site Registration	**$20.00**
___ ***Non-IDAC Members***	**$60.00**
On-Site Registration	**$80.00**

___ ***I will be attending the Fellows Mentoring Session***

Total Payment Enclosed **$** _____

Payment may be made by Check via mail or Credit Card

❑ Check ❑ Credit Card Number | | | | | | | | | | | | | | | | |

❑ Visa ❑ MasterCard ❑ American Express Expiration Date: _____

If registration payment is needed, mail form & check to:
IDAC, P.O. Box 66751, Los Angeles, CA 90066 or,
pay by credit card at web site: *www.idac.org* or,
fax form with credit card information to: *(310) 216-9274*

For Info: (310) 216-9265 e-mail: idac@idac.org

For Hotel Reservations — See "Accommodations" on facing page.

Registration Deadline: October 28, 2011
Hotel Reservations Deadline: October 4, 2011