**REGISTRATION FORM** (or register online at www.aiaa.org)

All registrants please complete the information below.

1. **Conference Badge Name**  
   First/Given Name  
   Last/Family Name

2. **Organization Name/Division/Department**  
   Email Address

3. **Address**
   City  
   State  
   Country/Zip/Postal Code

4. **Daytime Phone Number**  
   Fax Number (include country code)

5. **If you are registering as a student, indicate the following:**
   - **Degree Type** (BS, MS, PhD, etc.)
   - **Field of Study** (AE, ME, EE, etc.)
   - **Expected Graduation Date**
   - **Name of Institution**

6. **RETURN FORM TO:**
   - [ ] 1) For fastest, easiest service, register online at www.aiaa.org
   - [ ] 2) By mail: return completed form with payment to AIAA
   - [ ] 3) By fax: send the signed, completed form with credit card payment to P.O. Box 79240, 703.264.7657

   Registration forms must be received by 21 May 2012 to receive the early-bird rate. Registration forms cannot be processed without full payment.

   Cancellations must be received in writing no later than 4 June 2012. There is a $100 cancellation fee. Registrants who cancel beyond this date or fail to attend will forfeit the entire fee. If you have questions, content Chris Brown at 703.264.7504, (toll-free, U.S. only) 800.639.AIAA (2422), or chrisb@aiaa.org.

7. **FORM OF PAYMENT**
   - [ ] Purchase Order  
   - [ ] American Express  
   - [ ] Check  
   - [ ] VISA  
   - [ ] Travelers Check  
   - [ ] MasterCard  
   - [ ] Wire Transfer  
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   Credit Card Number: _______________  Expiration Date: ____________  Month: ____________ Year: ____________

   Signature: ___________________________  Date: ____________

   Email address of cardholder for receipt: ________________________________

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**AIAA MEMBERSHIP:** If you are registering at the conference rate, included with your registration fee is one year of AIAA membership. Sign below, then visit www.aiaa.org and click on My AIAA to update your contact information.

- Included in your AIAA membership will be periodic communications about AIAA benefits, products, and services. Check here if you prefer not to receive membership information via email.
- From time to time, we make member information available to companies whose products or services may be of interest to you. Check here if you prefer not to have your name and address used for non-AIAA mailings.

Signature: ___________________________  Date: ____________

- Check here if you are renewing or reinstating your membership. (You must pay full nonmember conference fee.)

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**EXTRA TICKETS**

- **Tuesday Evening Reception**  
  [ ] $60  
  No. of tickets: ________

- **Wednesday Award Luncheon**  
  [ ] $55  
  No. of tickets: ________

- **Online Proceedings**  
  [ ] $170  
  No. of copies: ________

- **JPL Tour**  
  [ ] $0

*Capacity of 80 people, no substitutions permitted.

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**TOTAL DUE:** $_________