



REGISTRATION FORM

IBS 2004 National Conference
Fri-Sat-Sun, March 12-14, 2004

Hotel Pennsylvania
7th Avenue & 33rd St • New York City

Station Call Letters: _____ College/School Name: _____
Station Phone: _____ Station Fax: _____ Station email: _____
Station Street Address: _____
City: _____ State: _____ Zip: _____

Registration Fee: IBS member-stations, IBS Professional Associates, High School Students:

If payment received by February 28, 2004: \$80/person; After Feb. 28, 2004: \$95/person

Member Special: First delegate from each IBS dues-paid Member Station - **FREE**; 2nd thru 7th delegates: \$80/person, Maximum total: \$480 – 8th delegate and above FREE. Under this Special, all station delegates must be registered by name and title and have a valid student ID at NYC registration. Names & titles may be changed (updated) FREE until March 5, 2004, when badges are pre-printed.

Registration Fee: Non-Member-stations:

If payment received by February 28, 2004: \$95/person; After Feb. 28, 2004: \$120/person

Registration is not effective until payment is received by IBS.

We are registering _____ people at the rate of \$_____ /person for a total amount of \$_____.

Complete this form and mail it with your payment check to:

IBS • 367 Windsor Highway • New Windsor, NY 12553

Person #1 (contact)

FIRST NAME: _____ LAST NAME: _____

PERSON'S JOB TITLE FOR ID BADGE: _____

Person #2

FIRST NAME: _____ LAST NAME: _____

PERSON'S JOB TITLE FOR ID BADGE: _____

Person #3

FIRST NAME: _____ LAST NAME: _____

PERSON'S JOB TITLE FOR ID BADGE: _____

Person #4

FIRST NAME: _____ LAST NAME: _____

PERSON'S JOB TITLE FOR ID BADGE: _____

Person #5

FIRST NAME: _____ LAST NAME: _____

PERSON'S JOB TITLE FOR ID BADGE: _____

For your Business Office, IBS is a non-profit, tax exempt educational organization — Federal ID# 23-705-9805

Registration does NOT include hotel accommodations. Call the Hotel Pennsylvania toll-free 1-800-223-8585.

Be sure to mention IBS (Intercollegiate Broadcasting System) Convention when making reservations to get our special room rate, while rooms are still available. Hotel reservations MUST be made by February 29, 2004. After that date the hotel will release the rooms to the public and it is likely the hotel will quickly be sold out.

IBS • 367 Windsor Hwy • New Windsor, NY 12553 • Phone: 845-565-0003 • Fax: 845-565-7446 • email: IBSHQ@aol.com



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Page 2

Person #6

FIRST NAME:

LAST NAME:

PERSON'S JOB TITLE FOR ID BADGE:

Person #7

FIRST NAME:

LAST NAME:

PERSON'S JOB TITLE FOR ID BADGE:

Person #8

FIRST NAME:

LAST NAME:

PERSON'S JOB TITLE FOR ID BADGE:

Person #9

FIRST NAME:

LAST NAME:

PERSON'S JOB TITLE FOR ID BADGE:

Person #10

FIRST NAME:

LAST NAME:

PERSON'S JOB TITLE FOR ID BADGE:

Person #11

FIRST NAME:

LAST NAME:

PERSON'S JOB TITLE FOR ID BADGE:

Person #12

FIRST NAME:

LAST NAME:

PERSON'S JOB TITLE FOR ID BADGE:

Person #13

FIRST NAME:

LAST NAME:

PERSON'S JOB TITLE FOR ID BADGE:

Person #14

FIRST NAME:

LAST NAME:

PERSON'S JOB TITLE FOR ID BADGE:

Person #15

FIRST NAME:

LAST NAME:

PERSON'S JOB TITLE FOR ID BADGE:

For additional names, use a blank sheet of paper and include First Name, Last Name and Job Title for ID Badge

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