

# INFORMATION

## Registration Information and Form

### 3 ways to register

Online [www.amstat.org/meetings/jsm/2009/onlinereg](http://www.amstat.org/meetings/jsm/2009/onlinereg)

Fax (301) 206-9789

Mail **JSM Registration**  
P.O. Box 221  
Annapolis Junction, MD 20701

Registration not accepted  
by telephone or email

Registration confirmations  
will be emailed to pre-  
registered attendees.  
Confirmations will be faxed  
or mailed by request only.

You can expect delays  
due to heavy volume  
during the weeks of  
registration deadlines.

\*Please provide an  
accurate address on your  
registration form. The ASA  
is not responsible for lost,  
misdirected, incomplete,  
damaged, or late mail.

#### Early Bird— May 1–June 29

Early Bird fees are in effect  
until 11:59 p.m. EDT on  
June 29, 2009. Early Bird  
registrants will receive  
name badge(s) and function  
tickets by mail prior to the  
conference.\* Bring these  
with you to avoid waiting  
in long registration lines.  
We will provide additional  
materials onsite.

#### Advance Registration— June 30–July 16

Advance registration fees  
are in effect until 11:59  
p.m. EDT on July 16, 2009.  
Advance registrants receive  
confirmation via email. Come  
to the registration desk at  
the Walter E. Washington  
Convention Center to pick up  
all registration materials.

#### After July 16

Register onsite August  
1–6, 2009, at the Walter E.  
Washington Convention Center.

#### JSM Registration Fees

Fees include the program book  
and session abstracts, as well  
as access to the Opening Mixer  
and Informal Dance Party.  
Online access to the 2009  
Access to the 2009 Proceed-  
ings (available in early 2010)  
also is included, except where  
noted ♡.

The preliminary program  
and abstracts are available at  
[www.amstat.org/meetings/  
jsm/2009/onlineprogram](http://www.amstat.org/meetings/jsm/2009/onlineprogram).  
The final program will be avail-  
able online by July 13, 2009.  
The program book and session  
abstracts will be distributed  
with registration materials in  
Washington, DC.

#### Payment

Payment must accompany  
registration. If you are paying  
by check, you must register  
by mail. If you are paying by  
credit card, you may register  
using any of the options  
listed. We are unable to accept

purchase orders. Do not  
submit registration materials  
more than once. Make your  
check or money order payable  
to the American Statistical  
Association in U.S. funds  
drawn on a U.S. bank. The  
ASA Federal ID is 53-0204661.

The ASA reserves the right to  
adjust member registration  
types to the nonmember type  
and charge the difference in  
rates if stated membership is  
not currently active. In such an  
event, you will first be notified  
and given the opportunity to  
update your membership.

#### Cancellations/Substitutions/Refunds

All cancellations and substitutions must be submitted  
in writing. **Email:** [jsm@amstat.org](mailto:jsm@amstat.org); **Fax:** (301) 206-  
9789; **Mail:** JSM Registration, P.O. Box 221, Annapolis  
Junction, MD 20701

- *Cancellations received by 5:00 p.m. EDT on  
June 29, 2009:* Cancellation fees are 20% of  
each item cancelled.
- *Cancellations received by 5:00 p.m. EDT on  
July 16, 2009:* Cancellation fees are 40% of  
each item cancelled.
- *Cancellations received after 5:00 p.m. EDT on  
July 16, 2009:* Will not be refunded.

Registration fees for session participants (presenter/pan-  
elists/discussants/chairs/organizers) are **nonrefundable**.

For questions or assistance, email [jsm@amstat.org](mailto:jsm@amstat.org) or call  
(866) 421-7169.

Last/Family Name \_\_\_\_\_ First/Given Name \_\_\_\_\_ Middle Initial \_\_\_\_\_ Badge Name (if different from First Name) \_\_\_\_\_  
 Membership(s): (check all that apply)  ASA  IMS  SSC  ENAR  WNAR  ICSA  IISA ASA ID# (if known) \_\_\_\_\_ Participants only: abstract or session # \_\_\_\_\_

Title \_\_\_\_\_ Organization \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_ ZIP/Postal Code \_\_\_\_\_ Country (Non-U.S.) \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_

In case of emergency, list the name and phone number of the person we should contact (remains confidential and is used only in case of emergency).  
 Emergency Contact's Name \_\_\_\_\_ Relationship to Registrant \_\_\_\_\_ Telephone Number \_\_\_\_\_

**Check all that apply:**  
 I am a participant (speaker/panelist/discussant/chair/organizer).  Please update my ASA customer information with this contact information.  
 I am a first-time JSM attendee and  will/  will **not** attend First-Time Attendee Reception.  Please exclude my information from contact lists managed by JSM for use by outside entities.  
 I have a disability that requires special services (attach a statement of your needs).

**ADD-ON FEES** (mark the appropriate box)

CONTINUING EDUCATION			TOURS	QUANTITY	PRICE TOTAL	QUANTITY	PRICE TOTAL	
Member	Nonmember	Student						
<b>Saturday, August 1</b>			Sunday, August 2	TR01 _____	X \$75 = \$ _____	Tuesday, August 4	TR09 _____	X \$43 = \$ _____
CE_01C <input type="checkbox"/> \$630	<input type="checkbox"/> \$765	<input type="checkbox"/> \$360		TR02 _____	X \$64 = \$ _____		TR10 _____	X \$40 = \$ _____
CE_02C <input type="checkbox"/> \$360	<input type="checkbox"/> \$475	<input type="checkbox"/> \$220		TR03 _____	X \$43 = \$ _____		TR11 _____	X \$40 = \$ _____
CE_03C <input type="checkbox"/> \$360	<input type="checkbox"/> \$475	<input type="checkbox"/> \$220		TR04 _____	X \$40 = \$ _____	Wednesday, August 5	TR12 _____	X \$40 = \$ _____
CE_04C <input type="checkbox"/> \$360	<input type="checkbox"/> \$475	<input type="checkbox"/> \$220	Monday, August 3	TR05 _____	X \$40 = \$ _____		TR13 _____	X \$40 = \$ _____
CE_05C <input type="checkbox"/> \$360	<input type="checkbox"/> \$475	<input type="checkbox"/> \$220		TR06 _____	X \$43 = \$ _____		TR14 _____	X \$50 = \$ _____
CE_06C <input type="checkbox"/> \$360	<input type="checkbox"/> \$475	<input type="checkbox"/> \$220		TR07 _____	X \$40 = \$ _____	Thursday, August 6	TR15 _____	X \$75 = \$ _____
CE_07C <input type="checkbox"/> \$360	<input type="checkbox"/> \$475	<input type="checkbox"/> \$220		TR08 _____	X \$50 = \$ _____		TR16 _____	X \$64 = \$ _____
<b>Sunday, August 2</b>			<b>TOTAL TOUR COST \$ _____</b>					
CE_08C <input type="checkbox"/> \$360	<input type="checkbox"/> \$475	<input type="checkbox"/> \$220	<b>ROUNDTABLES with COFFEE</b>					
CE_09C <input type="checkbox"/> \$360	<input type="checkbox"/> \$475	<input type="checkbox"/> \$220	\$15 each; includes continental breakfast					
CE_10C <input type="checkbox"/> \$360	<input type="checkbox"/> \$475	<input type="checkbox"/> \$220	Indicate your first and second choices by marking 1 and 2.					
CE_11C <input type="checkbox"/> \$360	<input type="checkbox"/> \$475	<input type="checkbox"/> \$220	<b>MONDAY</b>	<b>TUESDAY</b>	<b>WEDNESDAY</b>			
CE_12C <input type="checkbox"/> \$360	<input type="checkbox"/> \$475	<input type="checkbox"/> \$220	<b>August 3</b>	<b>August 4</b>	<b>August 5</b>			
CE_13C <input type="checkbox"/> \$360	<input type="checkbox"/> \$475	<input type="checkbox"/> \$220	ML01 _____	TL01 _____	WL01 _____			
<b>Monday, August 3</b>			ML02 _____	TL02 _____	WL02 _____			
CE_14C <input type="checkbox"/> \$230	<input type="checkbox"/> \$295	<input type="checkbox"/> \$135	ML03 _____	TL03 _____	WL03 _____			
CE_15C <input type="checkbox"/> \$360	<input type="checkbox"/> \$475	<input type="checkbox"/> \$220	ML04 _____	TL04 _____	WL04 _____			
CE_16C <input type="checkbox"/> \$390	<input type="checkbox"/> \$505	<input type="checkbox"/> \$250	ML05 _____	TL05 _____	WL05 _____			
CE_17C <input type="checkbox"/> \$360	<input type="checkbox"/> \$475	<input type="checkbox"/> \$220	ML06 _____	TL06 _____	WL06 _____			
CE_18C <input type="checkbox"/> \$360	<input type="checkbox"/> \$475	<input type="checkbox"/> \$220		TL07 _____	WL07 _____			
CE_19C <input type="checkbox"/> \$360	<input type="checkbox"/> \$475	<input type="checkbox"/> \$220		TL08 _____	WL08 _____			
CE_20C <input type="checkbox"/> \$360	<input type="checkbox"/> \$475	<input type="checkbox"/> \$220	<b>ROUNDTABLES/Speakers with LUNCH</b>					
CE_21C <input type="checkbox"/> \$230	<input type="checkbox"/> \$295	<input type="checkbox"/> \$135	\$40 each; includes meal					
<b>Tuesday, August 4</b>			Indicate your first and second choices by marking 1 and 2.					
CE_22C <input type="checkbox"/> \$230	<input type="checkbox"/> \$295	<input type="checkbox"/> \$135	<b>MONDAY</b>	<b>TUESDAY</b>	<b>WEDNESDAY</b>			
CE_23C <input type="checkbox"/> \$360	<input type="checkbox"/> \$475	<input type="checkbox"/> \$220	<b>August 3</b>	<b>August 4</b>	<b>August 5</b>			
CE_24C <input type="checkbox"/> \$360	<input type="checkbox"/> \$475	<input type="checkbox"/> \$220	ML07 _____	TL09 _____	WL09 _____			
CE_25C <input type="checkbox"/> \$360	<input type="checkbox"/> \$475	<input type="checkbox"/> \$220	ML08 _____	TL10 _____	WL10 _____			
CE_26C <input type="checkbox"/> \$390	<input type="checkbox"/> \$505	<input type="checkbox"/> \$250	ML09 _____	TL11 _____	WL11 _____			
CE_27C <input type="checkbox"/> \$360	<input type="checkbox"/> \$475	<input type="checkbox"/> \$220	ML10 _____	TL12 _____	WL12 _____			
CE_28C <input type="checkbox"/> \$360	<input type="checkbox"/> \$475	<input type="checkbox"/> \$220	ML11 _____	TL13 _____	WL13 _____			
CE_29C <input type="checkbox"/> \$230	<input type="checkbox"/> \$295	<input type="checkbox"/> \$135	ML12 _____	TL14 _____	WL14 _____			
<b>Wednesday, August 5</b>			ML13 _____	TL15 _____	WL15 _____			
Computer Technology Workshops \$55 each			ML14 _____	TL16 _____	WL16 _____			
CE_30T <input type="checkbox"/>	CE_33T <input type="checkbox"/>	CE_36T <input type="checkbox"/>	ML15 _____	TL17 _____	WL17 _____			
CE_31T <input type="checkbox"/>	CE_34T <input type="checkbox"/>	CE_37T <input type="checkbox"/>	ML16 _____	TL18 _____	WL18 _____			
CE_32T <input type="checkbox"/>	CE_35T <input type="checkbox"/>	CE_38T <input type="checkbox"/>	ML17 _____	TL19 _____	WL19 _____			
	CE_41T <input type="checkbox"/>		ML18 _____	TL20 _____	WL20 _____			
			ML19 _____	TL21 _____	WL21 _____			
			ML20 _____	TL22 _____	WL22 _____			
			ML21 _____	TL23 _____	WL23 _____			
			ML22 _____	TL24 _____	WL24 _____			
			ML23 _____	TL25 _____	WL25 _____			
			ML24 _____	TL26 _____	WL26 _____			
			ML25 _____	TL27 _____	WL27 _____			
			ML26 _____	TL28 _____	WL28 _____			
			ML27 _____	TL29 _____	WL29 _____			
			ML28 _____	TL30 _____				
			ML29 _____					

**MEETING REGISTRATION FEES** (mark the appropriate box)

	Early Bird May 1–June 29	Advance June 30–July 16
Member ♦	<input type="checkbox"/> \$325	<input type="checkbox"/> \$360
New ASA Member ♦♦	<input type="checkbox"/> \$405	<input type="checkbox"/> \$435
Nonmember	<input type="checkbox"/> \$450	<input type="checkbox"/> \$480
Student Member ♦	<input type="checkbox"/> \$ 75	<input type="checkbox"/> \$ 75
K–12 Teacher ◊	<input type="checkbox"/> \$ 75	<input type="checkbox"/> \$ 75
Senior Member ♦	<input type="checkbox"/> \$135	<input type="checkbox"/> \$135
MEETING REGISTRATION FEE		\$ _____

\*see Page 1 for cancellation policy

**ADD-ONS**

TOTAL CE Cost	\$ _____
TOTAL Guest Cost ◊	\$ _____
TOTAL Roundtables/Speaker Cost	\$ _____
TOTAL Tour Cost	\$ _____

**TOTAL REGISTRATION + ADD-ONS** \$ \_\_\_\_\_

Abstracts will be provided on CD-ROM. If you prefer a book, check here.

♦ Must have an active membership in one of the sponsoring societies and indicate it on your registration where asked.

♦♦ Includes discounted first-year ASA dues; not available to renewing or recently lapsed members.

◊ Proceedings not included.

**PLEASE TYPE OR PRINT CLEARLY**

**CREDIT CARD OR CHECK PAYMENT INFORMATION**  
 (NOTE: We are unable to accept purchase orders as payment.)

Check or money order enclosed payable to American Statistical Association (U.S. funds on a U.S. Bank)

Credit Card  VISA  MasterCard  Amex

Card Number \_\_\_\_\_

Exp. Date \_\_\_\_\_ CVS # (3-digit # on reverse of card) \_\_\_\_\_

Name of Cardholder \_\_\_\_\_

Cardholder's Signature \_\_\_\_\_

**TOTAL GUEST COST \$ \_\_\_\_\_ TOTAL ROUNDTABLES/SPEAKER COST \$ \_\_\_\_\_**

HEART HEALTHY  KOSHER  VEGETARIAN