



## 2010 Spring Meeting

The Inn on Fifth  
Naples, Florida  
February 18-19, 2010

### SPOUSE/GUEST REGISTRATION FORM

#### REGISTRANT INFORMATION:

Name

Job Title

Name for Badge

Company

Address

City

State

Zip Code

Email

Phone

Fax

Special Needs (diet and etc.)

Spouse/Guest Name

#### SPOUSE/GUEST INFORMATION:

Details on the spouse/guest program for the Spring 2010 Meeting are not yet finalized. If you would like a suggested activity included, please contact Colleen Walker at [cwalker@aspinet.org](mailto:cwalker@aspinet.org) or 770-209-7349.

**REGISTRATION FEE:** \$295 per person for the spouse/guest program. Rate includes all activities and scheduled meals.

#### PAYMENT:

ASPI Spring 2010 Spouse/Guest Program Registration Fee (\$295.00)

- Enclosed is my check for the full amount of \$\_\_\_\_\_ (Payable to ASPI).
- Please bill my credit card for the full amount of \$\_\_\_\_\_ (complete the following information)

AMEX      DINER'S CLUB      DISCOVER      MasterCard      VISA

Credit Card #: \_\_\_\_\_ Exp. \_\_\_\_\_

Name on Card: \_\_\_\_\_

Signature: \_\_\_\_\_

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