

**2009 ASAP FOIA/PRIVACY ACT TRAINING WORKSHOP REGISTRATION
September 21-23, 2009 - The Sofitel Water Tower Hotel – Chicago, Illinois**

The American Society of Access Professionals
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Telephone registrations ARE NOT accepted. Please register by completing the form below and faxing or mailing it to ASAP. ASAP reserves the right to close registration when program capacity is reached. **Persons registering in a timely fashion should check www.accesspro.org for confirmation of registration acceptance, thereby eliminating the need to call the ASAP office. ASAP requires 3 business days for processing. Registrations without payment information or proper authorization signatures will NOT be accepted.** Please print clearly and avoid using abbreviations for agency names/components. Registration lists, name badges, certificates, etc. are based on this information.

Last Name: _____ First Name: _____ Nick Name: _____

Title: _____

Agency/Org.: _____ Office: _____

Mail Address: _____

City, State, Zip _____

Tele: _____ Fax: _____ E-mail _____

Please list any special needs. ASAP, in compliance with the ADA is happy to assist. _____

- Yes No Publish my name/organization/telephone/fax/E-mail in the Networking Booklet.
- Yes No ASAP Member? ASAP is a nonprofit, professional member society. Federal, state or local government employment does not automatically entitle one to ASAP membership or member discounted program fees.

_____ How many years have you been working in FOIA?

_____ How many years have you been working in Privacy?

Please check the Breakout Sessions you will attend. (Registration will NOT be accepted without this information.)

- Session 2.3 Privacy-Conditions of Disclosure - OR - Session 2.4 FOIA-Classified, Homeland Defense Information
- Session 2.5 Privacy-Privacy Act Processing - OR - Session 2.6 FOIA-Privacy and Privileged Information
- Session 2.7 Exemption 4 - OR - Session 2.8 Negotiations & Litigation Considerations

Payment - Please refer to the procedures for registration, confirmations, receipts and cancellation fee policy. Registration MUST be accompanied by a credit card and authorized signature or completed training authorizations forms (SF-182). Fees include program materials, continental breakfasts, coffee breaks, and luncheons.

ASAP MEMBER: \$600 Early Bird - OR - \$650 AFTER August 31

NON MEMBER: \$680 Early Bird - OR - \$730 AFTER August 31

- Check/ Money Order Enclosed: Ck # _____ Amount: \$ _____
- Signed Training Authorization Enclosed (SF-182)
- Credit Card (VISA, MasterCard, American Express, IMPAC. Cards are processed weekly, PRIOR to the program.)

ASAP's Federal Tax I.D. number is 54-115-2815. ASAP's DUN & BRADSTREET # is 184057818.

Credit Card #: _____ - _____ - _____ - _____ Exp. Date: _____

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