



Please complete the registration form including signature and payment information. Use one registration form per person. Registrations will not be processed without full payment and registrant's full name. By submitting the registration form the individual agrees to all registration policies on ASCE's Conference website.

Contact Information (*Indicates required information)

*First Name _____ MI _____ *Last Name _____
 Credentials _____ Badge Nickname _____
 Title _____
 *Company/Organization/University _____
 *Street Address/PO Box _____
 *City _____ *State _____ *Postal Code _____ *Country U.S. _____
 *Primary Phone _____ *Cell Phone _____
 *Email _____ ASCE Member Number _____

Please answer these questions so that we may serve you better (*indicates required information):

*1 The organization I work for is: Private Government Education Military Other

*2 My position is: Partner/Principal Senior Manager Middle Manager Technical/Professional Staff Faculty Student Retiree

*3 How many previous ASCE Conferences have you attended? 0 1 2 3 or more

*4 My age group: Under 25 25-34 35-49 50-65 Over 65



5. Check if you require:
 Vegetarian Lacto-Vegetarian Ovo-Vegetarian
 Vegan Other _____

6. Check if you have allergies to the following:
 Peanuts Tree nuts Seafood
 Other _____

7. Check if you require special aids or services:
 Deaf or Hearing Impaired Blind or Visually Impaired
 Wheelchair Bound Other _____

Fax: (866) 902-5593
 Phone: (800) 548-2723 (U.S.)
 Phone: (703) 295-6300 (International)
 Mail: ASCE/COPRI PORTS '19
 PO Box 79668
 Baltimore, MD 21279-0668 USA

Join ASCE today and SAVE!

Simply visit www.asce.org/join or call (800) 548-2723 to request an application.

Register by June 12, 2019 and Save!

For complete Conference information and to register online, visit www.portsconference.org. For additional information please contact Customer Service at registrations@asce.org or call (800) 548-2723.

Save on Groups of 5 or More!

Group discounts of \$50 per registration are available for groups of five or more Full Registrants from the same organization, registering by filling out the paper registration form, submitting it and paying the total registration fees with one form of payment by **August 21, 2019**. Offer not valid for online registration. Contact Customer Service at registrations@asce.org.

Full Registration

	EARLY BIRD By 6/12/19	ADVANCE By 8/21/19	ONSITE After 8/21/19
ASCE Member	<input type="checkbox"/> \$725	<input type="checkbox"/> \$775	<input type="checkbox"/> \$825
Institute Member	<input type="checkbox"/> \$725	<input type="checkbox"/> \$775	<input type="checkbox"/> \$825
Non-Member	<input type="checkbox"/> \$875	<input type="checkbox"/> \$925	<input type="checkbox"/> \$975
Cooperating Org.	<input type="checkbox"/> \$725	<input type="checkbox"/> \$775	<input type="checkbox"/> \$825
Speaker Member	<input type="checkbox"/> \$725	<input type="checkbox"/> \$775	<input type="checkbox"/> \$825
Speaker Non-Member	<input type="checkbox"/> \$875	<input type="checkbox"/> \$925	<input type="checkbox"/> \$975
Moderator Member	<input type="checkbox"/> \$725	<input type="checkbox"/> \$775	<input type="checkbox"/> \$825
Moderator Non-Member	<input type="checkbox"/> \$875	<input type="checkbox"/> \$925	<input type="checkbox"/> \$975
Student Member	<input type="checkbox"/> \$250	<input type="checkbox"/> \$250	<input type="checkbox"/> \$250

ASCE Life Members: You will receive a 50% discount on the cost of your registration, which will be applied automatically to your online registration.

Full Registrants: Included in your Full Registration fee is the following ticket. There is no extra charge for this event. However, each registrant must mark yes or no below in order to receive a ticket to this event.

Ice Breaker Reception (Sunday)	<input type="checkbox"/> Yes, I will attend	<input type="checkbox"/> No
Exhibit Hall Luncheon (Monday)	<input type="checkbox"/> Yes, I will attend	<input type="checkbox"/> No
Awards Luncheon (Tuesday)	<input type="checkbox"/> Yes, I will attend	<input type="checkbox"/> No
Gala Dinner (Tuesday)	<input type="checkbox"/> Yes, I will attend	<input type="checkbox"/> No
Exhibit Hall Luncheon (Wednesday)	<input type="checkbox"/> Yes, I will attend	<input type="checkbox"/> No

Daily Registration

Please select one day: Monday Tuesday Wednesday

	EB	ADV	ONS
Member	<input type="checkbox"/> \$350	<input type="checkbox"/> \$400	<input type="checkbox"/> \$450
Non-Member	<input type="checkbox"/> \$450	<input type="checkbox"/> \$500	<input type="checkbox"/> \$550

Additional Tickets

(These events are included with Full Registrations)

	EB	ADV	ONS	QTY
Ice Breaker Welcome Reception (Sunday)	<input type="checkbox"/> \$75	<input type="checkbox"/> \$75	<input type="checkbox"/> \$75	_____
Exhibit Hall Luncheon (Monday)	<input type="checkbox"/> \$60	<input type="checkbox"/> \$60	<input type="checkbox"/> \$60	_____
Awards Luncheon (Tuesday)	<input type="checkbox"/> \$60	<input type="checkbox"/> \$60	<input type="checkbox"/> \$60	_____
Gala Dinner (Tuesday)	<input type="checkbox"/> \$175	<input type="checkbox"/> \$175	<input type="checkbox"/> \$175	_____
Exhibit Hall Luncheon (Wednesday)	<input type="checkbox"/> \$60	<input type="checkbox"/> \$60	<input type="checkbox"/> \$60	_____
Proceedings	<input type="checkbox"/> \$95	<input type="checkbox"/> \$95	<input type="checkbox"/> \$95	_____

ASCE uses the information you provide to administer your registration and to keep you apprised of conference information and related products and services. The name, job title, company information, and mailing address of registrants are also included in the conference attendee list that is provided to sponsors. For more information, see our Privacy Policy (www.asce.org/privacy).

Tour (The tour requires an additional fee.)

Wednesday, September 18

	EB	ADV	ONS
12:00 p.m. - 4:00 p.m.			
Lower Monongahela Lock and Dam Tour	<input type="checkbox"/> \$30	<input type="checkbox"/> \$30	<input type="checkbox"/> \$30

Short Courses (These events require an additional fee.)

Sunday, September 15

	EB	ADV	ONS
Vessel Mooring and Berthing			
8:00 a.m. - 5:00 p.m.			
Member w/Book	<input type="checkbox"/> \$345	<input type="checkbox"/> \$375	<input type="checkbox"/> \$410
Member w/o book	<input type="checkbox"/> \$245	<input type="checkbox"/> \$275	<input type="checkbox"/> \$310
Non-Member w/ book	<input type="checkbox"/> \$395	<input type="checkbox"/> \$425	<input type="checkbox"/> \$455
Non-Member w/o book	<input type="checkbox"/> \$295	<input type="checkbox"/> \$325	<input type="checkbox"/> \$355
Student w/ book	<input type="checkbox"/> \$175	<input type="checkbox"/> \$215	<input type="checkbox"/> \$255
Student w/o book	<input type="checkbox"/> \$125	<input type="checkbox"/> \$165	<input type="checkbox"/> \$205

Planning, Design and Implementation of Automated Terminals

8:00 a.m. - 5:00 p.m.			
Member	<input type="checkbox"/> \$245	<input type="checkbox"/> \$275	<input type="checkbox"/> \$310
Non-Member	<input type="checkbox"/> \$295	<input type="checkbox"/> \$325	<input type="checkbox"/> \$355
Student	<input type="checkbox"/> \$125	<input type="checkbox"/> \$165	<input type="checkbox"/> \$205

Waterfront Inspection and Rehabilitation, NDT/PDT for Waterfront Facilities

8:00 a.m. - 5:00 p.m.			
Member w/Book	<input type="checkbox"/> \$345	<input type="checkbox"/> \$375	<input type="checkbox"/> \$410
Member w/o book	<input type="checkbox"/> \$245	<input type="checkbox"/> \$275	<input type="checkbox"/> \$310
Non-Member w/ book	<input type="checkbox"/> \$395	<input type="checkbox"/> \$425	<input type="checkbox"/> \$455
Non-Member w/o book	<input type="checkbox"/> \$295	<input type="checkbox"/> \$325	<input type="checkbox"/> \$355
Student w/ book	<input type="checkbox"/> \$175	<input type="checkbox"/> \$215	<input type="checkbox"/> \$255
Student w/o book	<input type="checkbox"/> \$125	<input type="checkbox"/> \$165	<input type="checkbox"/> \$205

Large Floating Structure Design

8:00 a.m. - 12:00 p.m.			
Member	<input type="checkbox"/> \$175	<input type="checkbox"/> \$205	<input type="checkbox"/> \$235
Non-Member	<input type="checkbox"/> \$225	<input type="checkbox"/> \$255	<input type="checkbox"/> \$285
Student	<input type="checkbox"/> \$65	<input type="checkbox"/> \$105	<input type="checkbox"/> \$145

Theory and Design of Floating Wave Attenuators

1:00 - 5:00 p.m.			
Member	<input type="checkbox"/> \$175	<input type="checkbox"/> \$205	<input type="checkbox"/> \$235
Non-Member	<input type="checkbox"/> \$225	<input type="checkbox"/> \$255	<input type="checkbox"/> \$285
Student	<input type="checkbox"/> \$65	<input type="checkbox"/> \$105	<input type="checkbox"/> \$145

Grant Writing Workshop

1:00 - 5:00 p.m.			
Member	<input type="checkbox"/> \$175	<input type="checkbox"/> \$205	<input type="checkbox"/> \$235
Non-Member	<input type="checkbox"/> \$225	<input type="checkbox"/> \$255	<input type="checkbox"/> \$285
Student	<input type="checkbox"/> \$65	<input type="checkbox"/> \$105	<input type="checkbox"/> \$145

Dredging 101

8:00 a.m. - 12:00 p.m.			
Member	<input type="checkbox"/> \$175	<input type="checkbox"/> \$205	<input type="checkbox"/> \$235
Non-Member	<input type="checkbox"/> \$225	<input type="checkbox"/> \$255	<input type="checkbox"/> \$285

PAYMENT: Full Payment must accompany this registration form. No REFUNDS granted for cancellation after August 21, 2019.

Full Registration	\$ _____	<input type="checkbox"/> CHECK Checks must be issued in U.S. dollars and drawn on U.S. banks. To pay registration fee by check, postmark your registration by the deadlines indicated above and mail to: ASCE/COPRI PORTS '19 PO Box 79668 Baltimore, MD 21279-0668 USA	<input type="checkbox"/> CREDIT CARD <input type="checkbox"/> AMEX <input type="checkbox"/> VISA <input type="checkbox"/> MasterCard <input type="checkbox"/> Discover <input type="checkbox"/> Diners Card
Daily Registration	\$ _____		Credit Card # _____
Tour	\$ _____		Security Code _____ Expiration Date (MM/YY) _____
Short Courses	\$ _____		Cardholder Name _____
Additional Tickets	\$ _____		Signature _____
COPRI Membership Fee	\$ _____	<input type="checkbox"/> PURCHASE ORDER	Total to be Charged _____
GRAND TOTAL (pay this amount)	\$ _____	# _____	
		(must submit a copy of the PO with this registration)	