

IBS Fall Conference Conference REGISTRATION FORM

**IBS, Intercollegiate Broadcasting System, Inc.,
2014 Fall School/ College Radio/TV/Webcasting Conferences
September 27, Chicago; October 25, Boston; November 15, Redlands, CA**

Register Online with Credit Card: <http://www.collegebroadcasters.us>

**Use American Express, VISA, MasterCard, or Discover Card
Mail your reservation TODAY!**

Intercollegiate Broadcasting System (IBS)
367 Windsor Highway
New Windsor, NY 12553 - 7900

Print this form, fill it in and mail with your payment check.

Station Name/ Call Letters: _____

School/Community/Business Name: _____

Station email address: _____

Registration fee (\$45 per delegate): (IBS Federal ID for your business office is: 23 705 9805)

___ Registration below for IBS Columbia College, Chicago, IL (Saturday, September 27)

___ Registration below for IBS Boston, Simmons College, Boston, MA (October 25)

___ Registration below for IBS Univ of Redlands, CA (Near Los Angeles) (November 15)

IBS member registration fee: # of delegates _____ at \$45 per person including lunch = \$ _____

Non-member: registration fee: # of delegates _____ at \$95 per person including lunch = \$ _____

Please register the following people (please print clearly):

Person #1

First Name: _____ Last Name: _____

Person's Station Job Title for Badge: _____

Person #2

First Name: _____ Last Name: _____

Person's Station Job Title for Badge: _____

Person #3

First Name: _____ Last Name: _____

Person's Station Job Title for Badge: _____

Person #4

First Name: _____ Last Name: _____

Person's Station Job Title for Badge: _____

Person #5

First Name: _____ Last Name: _____

Person's Station Job Title for Badge: _____

Person #6

First Name: _____ Last Name: _____

Person's Station Job Title for Badge: _____

Person #7

First Name: _____ Last Name: _____

Person's Station Job Title for Badge: _____

Person #8

First Name: _____ Last Name: _____

Person's Station Job Title for Badge: _____

Person #9

First Name: _____ Last Name: _____

Person's Station Job Title for Badge: _____

Person #10

First Name: _____ Last Name: _____

Person's Station Job Title for Badge: _____

Please print any additional names & titles on a blank sheet of paper and attach it with your check.