

2010 LEVA International Video Evidence Symposium & Training Conference Registration Form

November 14 – 19, 2010 <> Indianapolis, IN

NAME _____ LEVA MEMBERSHIP NUMBER (if applicable) _____

ORGANIZATION _____

ADDRESS _____

CITY, STATE/PROVINCE, ZIP/POSTAL CODE _____

PHONE _____ FAX _____ E-MAIL ADDRESS _____

May this information be shared with LEVA exhibitors and its corporate sponsors? Yes ___ No ___

SHIRT SIZE (Full registration only): Mens ___ Womens ___ S ___ M ___ L ___ XL ___ 2X ___ 3X ___

Check box

*FULL REGISTRATION November 17 - 19 General Sessions President's Reception & Awards Banquet	Members (in Good Standing): \$525	
	Additional LEVA member in good standing from same agency: \$425	
	Non-Member: \$575	

Check box

PRE-CONFERENCE WORKSHOP November 14 - 16	Expert Witness Preparation and Testimony Presented by Jonathan Hak Limited to 30 students \$395	
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LEVA Membership not required to attend any WORKSHOP

Check box

PRE-CONFERENCE WORKSHOP November 15 & 16, 2009	Master's Level Codec Identification & FVA Workflow \$275 Presented By Grant Fredericks and George Reis	
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ONE-DAY WORKSHOP (Conducted twice!)	Advanced Collection & Processing Techniques \$175 November 16 Presented by Joanna Doute Wenk November 18	
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Check box

SPECIAL EVENTS/ DAILY FEE RATES	Wednesday, Nov. 17 - President's Reception Only: \$40	
	Wednesday, Nov. 17 - Sessions & Exhibits: FREE!!!!	
	<i>(If yes, please tell us if you plan to attend one or both of the sessions below)</i>	
	-- Wednesday, Nov. 17 – MPSC Training Session: FREE!!!!	
	-- Wednesday, Nov. 17 – DECT Training Session: FREE!!!!	
	Thursday General Sessions Only, Nov. 18: \$250	
	Friday Nov. 19 - General Sessions and Banquet: \$275	
	Friday Nov. 19 - General Sessions Only: \$250	
	Friday, Nov. 19 - Banquet Only: \$50	

***NOTE:** All of these events are **included** in the **Full** registration.

TOTAL AMOUNT DUE: _____ US \$

Payment Options:

1) **MAIL** this form with check or money order payable to LEVA to: LEVA, P.O. Box 547, Midlothian, TX 76065

2) **CHARGE** to credit card: (Underline one) MASTERCARD VISA AMERICAN EXPRESS

Print Name on card: _____ Exp. Date (mm/yy): ____/____

Card No. _____ Security Code _____

Authorized Signature: _____

3) **INVOICE** to: _____ Email Address: _____

PURCHASE ORDER NO. _____

4) **"LEARN NOW! PAY LATER!"** for Full conference and / or workshop: ___ Attendee is responsible for ensuring payment is satisfied by **January 28, 2011.**

For payment options #2, 3 and 4, complete this form and fax to the LEVA Business Office, (469) 533-3659.

Once payment is satisfied, a receipt will be emailed.

Refund Policy: Requests for refunds of registration fees (less a US \$25.00 handling fee) must be received in writing to the LEVA Business Office before 5:00 p.m., ET, November 5, 2009.

Any LEVA member who is not "in good standing" with the organization at the time of registration must bring their LEVA membership up to date and in good standing OR pay the Non-LEVA member registration fee of \$575.00.

For information, contact Mr. Jan Garvin, LEVA Training VP, (540) 842-1742, or E-mail: training@leva.org