



**American Association of Pharmacy Technicians
26th ANNUAL NATIONAL CONVENTION
Sheraton - Raleigh, North Carolina
August 7-9, 2008
REGISTRATION FORM**

THREE DAY REGISTRATION

INCLUDES WELCOME RECEPTION, VENDORS
LUNCHEON & SATURDAY BANQUET

- Prior to May 1, 2008 Member \$110.00
 Nonmember \$155 (with purchase
 of 1st time Only membership \$145)
- Prior to July 1, 2008 Member \$135.00
 Nonmember \$180 (with purchase
 of 1st time ONLY membership \$170)
- After July 1, 2008 Member \$160
 Nonmember \$200 (with purchase
 of 1st time ONLY membership \$190)

STUDENT REGISTRATION

- Prior to May 1, 2008 Member \$50
 Nonmember \$60
- Prior to July 1, 2008 Member \$60
 Nonmember \$70
- After July 1, 2008 Member \$80
 Nonmember \$90

Student 1-day fee will be ½ off above fee
PLEASE indicate which day(s) you will attend
 Thursday Friday Saturday

ONE-DAY REGISTRATION

INCLUDES MEETING SESSIONS & MEAL OF THE DAY

- Prior to May 1, 2008 Member \$85 Nonmember \$90
 Prior to July 1, 2008 Member \$100 Nonmember \$110
 After July 1, 2008 Member \$110 Nonmember \$120

PLEASE indicate which day you will be attending
 Thursday Friday Saturday

Welcome Reception and Registration:

August 6, 2008 6:00 pm to 8:00pm

Attending: YES NO

Extra Vendor Luncheon tickets:

\$ 20.00 (indicate number) _____

Extra Saturday Banquet / Awards Ceremony Tickets:

\$40.00 each (indicate number) _____

FOR CONVENTION UPDATES VISIT: www.pharmacytechnician.com

FOR HOTEL ACCOMMODATIONS: (copy and paste the following link into a web browser)
<http://www.starwoodmeeting.com/StarGroupsWeb/res?id=0710099580&key=10B32>

NAME: _____

ADDRESS: _____

CITY: _____ **STATE** _____ **ZIP** _____

TELEPHONE: (____) _____ **EMAIL:** _____

AAPT MEMBERSHIP NUMBER _____ **EXP.** _____

METHOD OF PAYMENT

- Check (Return check fee \$25)
 Money Order (checks must be drawn on US bank)
 Visa MasterCard American Express

Total amount enclosed: \$ _____

Card number: _____ Expiration date: _____

Signature: _____

No Convention cancellations after July 1, 2008 (any cancellations prior to this date must be approved and are subject to a \$25 administrative fee)

RETURN COMPLETED REGISTRATION & PAYMENT TO:

AAPT Convention 2008
 C/O Bobbie Craddock, AAPT Treasurer
 735 Fritz Zwicke Rd.
 Sequin, TX 78155