



PTC/USER World Event 2010- Registration Form

June 6-9 ★ Rosen Shingle Creek Resort ★ Orlando, Florida

Complete BOTH SIDES of this form and Mail or Fax to PTC/USER Conference Office.
Your registration is not confirmed until PTC/USER issues written or e-mail confirmation.

Registrant Information

First Name (Name and Company will appear on conference badge) _____ Last Name _____

Company _____

Job Title _____

Address _____

Address (continued) _____

City _____ State _____ Zip or Postal Code _____

Country _____

Phone _____ Fax _____

E-Mail _____

Emergency Contact Name _____

Emergency Contact Phone _____

Physical or dietary needs _____

How many years have you been using PTC products?

Check here if you would like to volunteer at the conference.

Check here if you would like your name to be shown on the attendee list.

- Primary Interest**
(Choose One)
- ___ Arbortext
 - ___ CoCreate
 - ___ Mathcad
 - ___ Pro/ENGINEER
 - ___ ProductView
 - ___ Windchill

- Company Industry**
(Choose One)
- ___ Aerospace & Defense
 - ___ Agricultural
 - ___ Airlines
 - ___ Automotive
 - ___ Electronics & High-Technology
 - ___ Federal & Civil Government
 - ___ Financial Services
 - ___ Industrial Equipment
 - ___ Life Sciences
 - ___ Publishing
 - ___ Process Manufacturing
 - ___ Retail, Footwear & Apparel
 - ___ Other/Prefer not to answer

Fees

Choose One (required)

\$1095 USD

Conference Fee (a) \$

Optional Post-Conference Training

Thursday, June 10 - Cost \$299

Training Fee (b) \$

TOTAL DUE
Add lines (a) & (b) \$



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Payment Must Accompany Registration

 Check

Check Number _____

Please make check payable to PTC/USER, Inc.

TOTAL DUE
Add lines (a) & (b)

\$

 Visa Mastercard AMEX

Card Number

Expiration Date

Month

Year

Security Code

3 digits for Visa/MC
4 digits for AMEX

X

Sign Here to Authorize Charge

Payment Information

Complete this section if paying by credit card

Cardholder Name (if different from registrant)

Company

Billing Address

Billing Address (continued)

City

State

Zip or Postal Code

Country

Phone

Cancellation and Refund Policy

A 100% refund will be given if notice of cancellation is received in writing by the close of business on May 7, 2010.

Send notice to: PTC/USER Conference Office, 51 Harborview Road, Hull, MA 02045. An employee of the same company may be substituted by notifying the PTC/USER Conference Office via Fax #: 781-780-5648 prior to May 7, 2010.

After May 7, 2010 our normal policy will apply (100% cancellation penalty) and no refund will be given.

Please return form to:

PTC/USER, Inc.
51 Harborview Road
Hull, MA 02045
Phone: (781) 780-5647
Fax: (781) 780-5648