Human Factors and Ergonomics Society, Houston Chapter

One-Day Conference Registration Form

Name and affil	ion is marked with * liation		ast name:			
Your name as you	would like it to appo	ear on the name	badge:			_
Your area of intere	st, as you would like	e it to appear on	your badge:	(e.g., safety, we	eb usability,	
physical ergonomi	cs, etc.):					
Address Address line1:						
Address line2:						
City, State, Zip:						
Preferred Phone:						
Fax:						
			_			
•	selection (circle dard HHFES memb	,	Student w	ith student HH	FES membership:	\$30
Standard without s	standard HHFES me	embership: \$50	Student w	ithout student I	HHFES membersh	ip: \$25
Corporate Sponsor	:: \$300					
	oution List: your information add remove yourself from					
disorder, curtailme	ement of this conference is ent of transportation of such occurrances.	facilities or any	other emerge	ency making it	impossible to hold	the confer-
*I certify that I have	we read the above sta	atement and agree	ee to all terms	S.		
Signature:			Date:			