Illinois Society for Respiratory Care
Annual Conference and Exhibition 2012
Drury Lane Convention Center
May 30th through June 1st, 2012

Registration Information

Multiple registration discount: (Must be mailed together)

☐ • 5 to 9 full 3 day MEMBER applications - 5% discount

☐ • 10 or more full 3 day MEMBER applications - 10% discount

☐ Spouse Registration, on-site only. No CEU's awarded. Cost $25.00

ISRC Conference Hotel Rates – State you are attending the ISRC Conference when making your reservation
The hotel registration deadline is: Thursday, May 3rd, 2012
Hilton Suites: Single or Double $103.00plus tax and fees Telephone - 630-941-0100
One night's room deposit is required for reservations.

Visit the ISRC website at http://www.isrc.org/isrcconfindex.htm for more information and updates.

ISRC 44th Annual Conference Registration Form - May 30, 31, and June 1, 2012
Pre-registration deadline is Saturday, May 19th

- ω Please type or print. Registration is not complete without full remittance.
- ω Refund policy: All cancellations must be in writing no later than May 25th
- ω There is a $30 processing fee for cancellations or returned checks.
- ω No fees will be returned after the deadline.

Name: _____ **State License #:** _____
Last **First**

Home Address: _____
Street **City** **State** **Zip**

Employer/School: _____
City **Position**

Work Phone: _____ **Home Phone:** _____ **E-mail:** _____

AARC number: _____ **ISRC No.** _____ **Years in Respiratory:** _____
(Proof of membership required at registration - Check your expiration date.)

Pre-registration: **Application must be postmarked no later than Saturday, May 19th. Pre-registration will not be accepted after this date. (On-site registration is an additional $25.00, including student registrations)**

	AARC Member	ISRC Member	Non-member	Student Member	Student Non-member	Registration Fee:
Full 3 day registration	☐ $155	☐ $195	☐ $245	☐ $50	☐ $100	_____
Single day registration	☐ $90	☐ $110	☐ $140	☐ $50	☐ $100	_____
						_____
					TOTAL ENCLOSED:	_____

Mail completed form to:
Douglas McQueary,
13932 Michigan,
Riverdale, IL, 60827
Phone: (773) 962-4086
Fax: (773)-602-3811

Payment enclosed $ _____ Check # _____ Make check payable to: ISRC
If you wish to charge your registration, please complete the following information.

Credit card: _____ Exp. date _____
☐ VISA / ☐ Master Card / ☐ Discover

Card holders Signature _____ Amount charged $ _____

Chair Person – **Kelli DeBerry** - (847) 981-3581 Exhibits – **Larry Dastych** (630) 567-1057
Registration and Membership: **Douglas McQueary** (773) 962-4086