



**ASSOCIATION OF AYURVEDIC PROFESSIONALS OF  
NORTH AMERICA (AAPNA)**

[www.aapna.org](http://www.aapna.org)

**Presents**

**INTERNATIONAL AYURVEDA CONVENTION 2010**  
***“Anti-Aging and Rejuvenation Through Ayurveda”***

**OCTOBER 8 – 10, 2010**  
**MIAMI, FLORIDA, USA**

**REGISTRATION FORM**

Early Bird Registration By: April 30, 2010

Advance Registration By: June 30, 2010

Full fees apply after June 30, 2009

***CONTACT INFORMATION (Please type or print):***

Name: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip / Postal Code: \_\_\_\_\_

Country \_\_\_\_\_

Email \_\_\_\_\_

Phone (Day) \_\_\_\_\_ Phone (Eve) \_\_\_\_\_

**REGISTRATION (includes 6 meals):**

| <b>Registration Category</b>           | <b>Early Bird<br/>Before<br/>April 30, 2010</b> | <b>Advance<br/>Before<br/>June 30, 2010</b> | <b>Full Payment<br/>After June 30, 2010</b> |
|--|---|---|---|
| <input type="checkbox"/> General       | \$300.00  | \$350.00                                    | \$400.00                                    |
| <input type="checkbox"/> Professional* | \$250.00  | \$300.00                                    | \$350.00                                    |
| <input type="checkbox"/> Student*      | \$200.00  | \$250.00                                    | \$300.00                                    |

**DAY PASS REGISTRATION\*\*:**

|                                   | <b>Friday</b> | <b>Saturday</b> | <b>Sunday</b> |
|-----------------------------------|---------------|-----------------|---------------|
| <input type="checkbox"/> Day Pass | \$100.00      | \$200.00 / day  | \$100.00      |

*\*Any professional organization or academic institution. Proof of membership or enrollment is required.*

*\*\*Day Passes will be offered subject to availability of space. No discounts are applicable. Includes meals and presentations.*

*Sunday special: Meet and greet the great luminaries of Ayurveda.*

**Refund Policy:**

*For cancellations made –*

- *before April 30, 2010, 75% of the registration fee will be refunded.*
- *before June 30, 2010, 50% of the registration fee will be refunded.*
- *before September 15, 2010, 25% of the registration fee will be refunded.*
- *after September 15, 2010, no refund will be issued.*

**PAYMENT (Payment is due in full at the time of registration):**

Credit Card:  VISA     MASTER CARD     AMEX     DISCOVER

CC Number: \_\_\_\_\_

Name as it appears on the credit card: \_\_\_\_\_

Billing Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_ Country \_\_\_\_\_

Expiration Date: \_\_\_\_\_ 3-Digit Code: \_\_\_\_\_ Total Payment: \_\_\_\_\_

Signature: \_\_\_\_\_

CHECK: Please make your checks payable to "AAPNA"

Please take advantage of the offered specials and mail your registration form and preferred payment to:

International Ayurveda Convention 2010  
AAPNA  
567 Thomas Street  
Coopersburg, PA 18036  
USA

**SURVEY:** *(Please take a few minutes to complete this survey)*

I am attending the convention for (check all applicable reasons)

- Personal or professional academic development
- Presenter
- Sponsor
- Meeting and networking with other professionals
- Other: \_\_\_\_\_

I heard/read about the convention from/in

- AAPNA Website
- Magazine: \_\_\_\_\_
- Other Website: \_\_\_\_\_
- Email notification
- Word of mouth
- Other: \_\_\_\_\_

I would like to receive information on products and services from sponsors:

- Yes
- No