

Registration Form



Midyear Meeting

Inter American Press Association

Hotel Hilton Barbados Resort

April 4 - 7, 2014

	will be represented by (please type or print name			
(Publication or compa	iny name to appear on badge)			
NamePosition				
	if accompanying)			
Business address	City			
Country	Zip Code			
Check (Make paym (We can only accept che	Registration Fees (please send payment to IAPA office): nent to IAPA, in US\$ dollars only): Check Number cks payable at US domestic banks) C and AX with payment of a 5% surcharge. Please authorize charge by signi	ing below		
Card number	Security Code		Expiration dat	e
Card holder billing address	ss			
Name on card	Authorized signature			
☐ Wire transfer - FOR	INFORMATION TO WIRE FUNDS, please contact Ms. Paola Dirube at pdirube@	sipipa.org, or	at (305) 634 2	2465
Registration Fees	Delegates (including seminar fees) Delegates (without seminar fees) Repeat non members Spouses and journalism professors Retired members 17 and under	US\$ US\$	Cost 1,500 1,150 1,700 750 250 325	Total
	Delegates from Barbados attending for the first-time, will receive a special rate per person. This will include IAPA membership for one you Delegates attending for the first-time and new members Seminar Program	ear US\$ US\$ US\$	750	

LATE REGISTRATION:

Surcharge of 5% for registration received between February 1 - March 3, 2014; 10% if received after March 4.

CANCELLATION OF REGISTRATION:

Full refund if notification received by February 1^{ft}, 2014; 50% if received between February 1^{ft}. and March 3. No refunds after March 3.

Please return this form to the IAPA offices in Miami:

1801 SW 3rd Avenue, Jules Dubois Bldg., Miami, Florida 33129. Fax (305) 635-2272 e-mail: pdirube@sipiapa.org;

To register for the meeting on line, please visit our web site: www.sip-asambleas.org

For hotel reservations, please contact the hotel directly through the links provided in our web site: www.sip-asambleas.org