



WASHINGTON, DC  
FEBRUARY 17 + 18, 2006

### REGISTRATION FEES

(for registrations received by  
January 20, 2006)

#### AAN MEMBERS

\$150 for first registrant  
\$75 for each additional registrant

#### NON-AAN MEMBERS

(with annual revenue \$2 million and under)

\$200 for first registrant  
\$150 for each additional registrant

#### NON-AAN MEMBERS

(with annual revenue over \$2 million)

\$300 for first registrant  
\$250 for each additional registrant

*For registrations received in the AAN office  
after January 20, 2006, and on site,  
add \$25 fee per registrant.*

#### CANCELLATION POLICY

All cancellations must be **in writing** and  
must be received in the AAN office by  
February 10, 2006 to qualify for refunds.  
No refunds after February 10, 2006.

Please send this form with full payment to:

**Debra Silvestrin**

**Association of Alternative Newsweeklies**

**1250 Eye Street NW, Suite 804**

**Washington, DC 20005-5982**

**tel: (202) 289-8484**

**fax: (202) 289-2004**

Paper \_\_\_\_\_

Contact \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone \_\_\_\_\_

### REGISTRANTS

Name \_\_\_\_\_

Title \_\_\_\_\_ E-mail \_\_\_\_\_

If you are sending more than seven registrants, please copy this form.

First Registrant \$ \_\_\_\_\_

Total for Additional Registrants \$ \_\_\_\_\_

**Total Payment** \$ \_\_\_\_\_

### FORM OF PAYMENT

Check (Make your check payable to AAN)

Credit card

The following is required for credit card payments.

Card number \_\_\_\_\_

Expiration date \_\_\_\_\_

Name on card \_\_\_\_\_

Billing address \_\_\_\_\_

Telephone number of cardholder \_\_\_\_\_

Signature of cardholder \_\_\_\_\_