

DECEMBER 1-6, 2024Sydney, Australia

REGISTRATION FORM

Enabling a Better Understanding of Constraints, Opportunities, and Practices for Improving Cell Design, Productivity, Energy Efficiencies, and Decarbonization

www.tms.org/IAE2024
Web registration requires credit card payment.

1-724-776-3770
Fax registration requires credit card payment.

PHONE

1-724-776-9000
Phone registration requires credit card payment.

E-MAIL

mtgserv@tms.org E-mail registration requires credit card payment. WAIL P

TMS: 5700 Corporate Drive Suite 750 Pittsburgh, PA 15237 Checks made payable to: TMS

DISCOUNT REGISTRATION DEADLINE: NOVEMBER 1, 2024

Payment must accompany form. Forms received after November 1, 2024 will be processed at the standard rate.

Preferred First name:Middle name		COURSE REGISTRATION FEES			
		Registration fee includes lectures, welcome reception, refreshment breaks, course notes, lunch, plant tour, and graduation dinner.			
Last name:		. Course notes, tunch, plant to	•	Standard	
Affiliation/Employer:		Member		\$3,095	
, and all of the property of t		Nonmember ^b	□ \$3,195 [\$3,295	
Title:		^a Discount rates through Novemb	per 1, 2024		
This address is ☐ Business ☐ Home ☐ New Address/Correction		b Professional nonmember registrants are eligible to receive complimentary TMS membership through December 31, 2025. Instructions for accessing membership will be provided following registration.			
Street Address:		COMMUNICATION AND PRIVACY PREFERENCES			
City:State/Province:		☐ I agree to receive communications from TMS on society news, events, and initiatives (European Union, Brazil, Canada, and China residents only).			
Zip/Postal Code:Country:					
Talanhana		Please Note: TMS will contact registrants prior to the start of the course for identification information and sizing for protective			
Telephone:			tion information and sizing for prot I on the plant tour. This information		
E-mail:		shared	d with the plant tour hosts.		
Special Dietary Needs: Vegetarian Vegan	□ Cluton Frod □ No Bork				
Special Dietal y Needs. Vegetarian Vegan					
☐ Dairy Free ☐ Allergy – Nut ☐ Allergy – She	lfish 🗌 Allergy – other				
Other:					
Name of emergency contact:					
Telephone of emergency contact:					
REGISTRATION TOTAL	PAYMEN	T: Payment should be made in	U.S. dollars drawn on a U.S. bank.		
Total Payment \$	Credit Card: Usa MasterCard Discover American Express				
Payment Method (check all that apply):	Credit Card Billing Address: Zip code:		le:		
☐ Check, Bank Draft, Money Order (Make checks payable to TMS.)	Card #:Expiration Date:		te:		
☐ Credit Card	Cardholder Name:			CVV:	
	Signature:				
	I authorize TMS to charge	my credit card in the amount o	f\$		

CANCELLATION/REFUND POLICY: TMS reserves the right to cancel this course due to low registration; registrants will be notified at least 20 days prior to the course date and receive full refunds of registration fees paid to TMS. Travel-related expenses are the responsibility of the registrant and not included in registration fee refunds. If a registrant must cancel, TMS must be notified via email to mgtserv@tms.org before November 1, 2024. Refunds will be issued minus a \$130 cancellation fee. No refunds will be processed after November 1, 2024.

TMS POLICIES: By registering for this meeting, attendees accept the terms of the TMS Privacy Policy and acknowledge that they may be photographed and/or recorded by TMS for promotional purposes while at events as described in the TMS Meeting Policies. Registrants and their guests also agree to abide by the TMS Anti-Harassment Policy, TMS Meetings Code of Conduct, and TMS Meeting Policies. For additional information on policies related to TMS events, visit www.tms.org/MeetingsPolicies.