



REGISTRATION

Last Name:		First Name:		Prefix (Mr., Ms. Dr., Rank, etc.)	
Company Name:		Job Title:			
Address:		City:		Tel:	
		State:	Zip:	Fax:	
		Country:			
		E-mail (required for notifications):			

REGISTRATION FEES

Before April 22, 2011

- Gov't Expo Only **N/C**
- Active Military Only **N/C**
- Industry Expo Only **\$250.**
- Additional Exhibitor **\$250.**

NO CHARGE FOR MEMBERS OF THE FOLLOWING 3 GROUPS

- SFA Member **ENTER YOUR MEMBER # IN THE BOX BELOW**
- USA Member
- AFA Member

Total Fees: \$

QUESTIONS -- INFORMATION

Email: Registration@lodestar-group.com
Phone: 919-954-1633
Fax: 919-882-0982
Send Checks and government purchase orders to: Lodestar Group-SpecOps West
3737 Glenwood Ave. Suite 100
Raleigh, NC 27612

Cancellation Policy

Cancellations postmarked or emailed before 04/15/2011 will receive a full refund less a \$50 cancellation fee. No Refunds will be issued for cancellations received after 04/15/2011. There will be no refunds for "No Shows." Substitutions are welcome in advance. Notify Spec OPS West 2011 Registration via email or fax of substitutions; email: registration@lodestar-group.com fax: (919) 882-0982. Substitutions requests should include: 1. Original Registrant 2. Substitute Registrant: Name, Organization, Address, Email, and Telephone.

PAYMENT INFORMATION

VISA MASTERCARD AMERICAN EXPRESS
 Check (enclosed) Govt Purchase Order/Training form # _____ (Enclose with Registration)
 Credit Card # _____ Exp. Date _____ CVV Code _____
 Name on Card _____ Signature _____ Date _____

www.SpecOpsWest.com