





Date _____ List Your CBCP, FBCI, CRP# _____
 Mr/Mrs/Ms _____ First Name _____ Last Name _____
 Company _____
 Title _____ Mail Stop _____
 Address _____
 City _____ E-Mail _____
 State _____ Country _____ Zip _____
 Telephone _____ Fax _____
 Print Name As It Should Appear On Badge _____
 List Any Designations For Badge _____
 Emergency Contact Name/Phone Number _____
 Check here if you require special needs _____ Please specify _____
Notify conference personnel during Onsite Registration of your arrival and special needs.

Indicate Your Industry: _____ Banking/Financial _____ Public Utilities _____ Transportation _____ Insurance
 _____ Communications _____ Manufacturing _____ Government _____ Education _____ Computer Services
 _____ Wholesale _____ Health Care _____ Petroleum _____ Other: _____
 Rank Your Experience Level _____ Novice (less than 2 yrs) _____ Intermediate (2-5 yrs.) _____ Advanced (5+ yrs.)
 Is This Your First Conference at DRJ? _____ Yes _____ No

_____ Check enclosed for \$ _____ Which Discounts Apply (if any) ? _____
 _____ Bill my company, Attn: _____
 _____ Purchase order attached, P.O. # _____
 _____ Bill my  _____ Bill my  _____ Bill my  _____ Bill my 
 Account # _____ Exp. Date _____
 Signature _____

Cancellation Policy (Must be in writing): Conference enrollment may be cancelled through Aug. 19 without penalty. No refunds or credits will be given for cancellations received after Aug. 19. All no shows will be charged the full amount. All cancellations must be received in writing.

I have read and understand the cancellation policy. _____

Promotional Policy: DRJ retains the right to use attendee images and comments for promotional purposes.

Name: _____ Company: _____

Please complete this section. Circle your session preference. Choose only one session per time slot.

Sunday, Sept. 19

Workshop Sessions SWS-1 SWS-2 SWS-3 SWS-4 SWS-5 SWS-6

Monday, Sept. 20:

Breakout Session 1 SS-1 MS-1 TS-1 ES-1 AS-1 IS-1
 Breakout Session 2 SS-2 MS-2 TS-2 ES-2 AS-2 IS-2
 Breakout Session 3 SS-3 MS-3 TS-3 ES-3 AS-3 IS-3

Tuesday, Sept. 21:

Breakout Session 4 SS-4 MS-4 TS-4 ES-4 AS-4 IS-4
 Workshop Sessions WS-1 WS-2 WS-3 WS-4 WS-5 WS-6

Registration Rates

Registration rates for the conference are as follows:

- only \$795.00 through July 19
- only \$895.00 through Aug. 19
- only \$995.00 through Sept. 19

Make conference checks payable to Disaster Recovery Journal. All fees must be paid in US currency only and payment must be drawn on a U.S. bank.

Three Easy Ways To Register

Fax: 314-894-7474
 24-hours a day
 Mail: DRJ Registrar
 P.O. Box 510110
 St. Louis, MO 63151
 Web: www.drj.com

For information

(314) 894-0276
 9 am - 5 pm CST
 -or email-
 mercedes@drj.com

Early Registration Bonus

Register by June 21 and receive an additional \$50 discount. This bonus applies regardless of any other discounts that have been taken as long as the form reaches our office by June 21, 2004.

Registration Discounts

Three or more employees from the same company who register at the same time are eligible for a 10% discount. All certified individuals (**must be certified at the time of registration**) are eligible for a 10% discount. All contingency group members are eligible for a 10% discount with proof of membership. These discounts must be requested at the time of registration. No refunds of the discount will be issued, and only one discount per registrant will apply (except Early Registration Bonus).