

# Texas Association for Investigative Hypnosis

## 2011 Training Conference

Please take a moment to complete the following membership renewal form/conference registration. Please send this form in by ***November 1st*** so that we may have an accurate count for the conference and the meal on Tuesday evening. If you are a new member, you may be asked to also complete a membership application.

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Last First Middle

Agency: \_\_\_\_\_ Rank: \_\_\_\_\_

SSN or PID # \_\_\_\_\_

Work Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

*I would like TAIH information mailed to:*

Home  Office

Phone Numbers:

Work Phone: ( ) \_\_\_\_\_ Cell Phone: ( ) \_\_\_\_\_

Home Phone ( ) \_\_\_\_\_ Fax: ( ) \_\_\_\_\_

Work E-Mail Address: \_\_\_\_\_

Personal E-Mail Address: \_\_\_\_\_

From time to time, we will send out e-mail announcements with attachments (newsletters, newspaper articles, etc.) to all members. Some of these items will be sent as PDF documents (readable with Adobe Acrobat Reader). *Please let us know if you would prefer contact only by USPS Mail or phone.*

Are you able to receive PDF documents?  Yes  No

Register for:

I will be attending the conference. Enclosed are my conference registration fees and annual membership dues of ***\$100.00***.

I will be unable to attend the conference, but wish to renew my membership. Enclosed are my annual membership dues of ***\$50.00***.

Method of Payment

- Check/Money Order
- Visa
- MasterCard
- American Express
- Discover
- Purchase Order

Credit Card # \_\_\_\_\_

Exp. date \_\_\_\_\_

Signature \_\_\_\_\_

Card Security Code (3-4 digit code) \_\_\_\_\_

Please mail this completed form and payment/purchase order info (if included) to:

TAIH c/o Kerry Sosa, 102 Texas Ranger Trail, Waco, TX 76706