



FracMan[®] Workshop Registration Form
Sheraton West Hotel - 360 Union Boulevard - Lakewood, CO 80228
July 26-28, 2010

1. Registration Information

Name: _____ Today's Date _____
Address line 1: _____
Address line 2: _____
City: _____ State: _____ ZIP: _____ Country _____
Phone number: (____) _____
Email address: _____

2. Payment and Fees:

The course registration fee of \$US 2000.00 must be paid in advance. Checks and purchase orders should be made payable to Golder Associates Inc.

Enclosed check or purchase order
 Credit card payment:
 VISA MasterCard
 Name on card: _____
 Card Number: _____
 Expiration Date (MM/YY): ____/____
 Signature (required if form is faxed/mailed/emailed pdf): _____

Please email this form to hsisley@golder.com or fracman@golder.com. Credit card information can be also be provided via telephone to Bill Dershowitz at (425) 216-0820. For registration by mail, use the address:

FracMan Technology Group
Golder Associates Inc.
18300 NE Union Hill Rd #200
Redmond WA 98052 USA

A full refund will be provided in the course is cancelled for any reason, or if registration is cancelled up to 5 days before the course. All travel, hotel, and per-diem costs are the responsibility of registrants.

3. Course information

Logistical information and schedules will be provided via email following registration. Additional information is available online at www.fracman.com.