

The International Society of Precision Agriculture in partnership with Kansas State University presents the
16th International Conference on Precision Agriculture

Registration Form

Register online at www.ispag.org/icpa

21-24 JULY 2024 • Manhattan, Kansas USA

(* indicates required information)

Salutation _____ First Name* _____ MI _____ Last Name* _____

Badge Name* _____ Affiliation/Organization* _____ Title/Position* _____

Special Needs (accessibility, food allergies, etc.) _____

Address* _____ City* _____ State/Province* _____

Zip/Postal Code* _____ Country* _____ Phone (with Country Code)* _____

Email* _____ Website _____

REGISTRATION FEES	Conference	Membership	Total Cost	TOTAL
PLEASE NOTE: ALL REGISTRATION PRICING WILL INCREASE BY US\$ 100 AFTER 3 JULY 2024.				
FULL REGISTRATION				
Full Registration with active membership	US\$ 750		US\$ 750	US\$
Full Registration with 2-year membership	US\$ 740	US\$ 160	US\$ 900	US\$
Full Registration without membership	US\$ 1,100		US\$ 1,100	US\$
ONE DAY REGISTRATION				
One-Day Registration with active membership	US\$ 435		US\$ 435	US\$
One-Day Registration with 2-year membership	US\$ 435	US\$ 160	US\$ 595	US\$
One-Day Registration without membership	US\$ 750		US\$ 750	US\$
STUDENT REGISTRATION				
Student Registration with active membership	US\$ 375		US\$ 375	US\$
Student Registration with 2-year membership	US\$ 375	US\$ 100	US\$ 475	US\$
Student Registration without membership	US\$ 625		US\$ 625	US\$
COMPANION REGISTRATION				
Available only with a Full Conference Registration			US\$ 220	US\$
TOTAL				US\$

PAYMENT (US Dollars)

My check in U.S. funds for \$ _____ is enclosed as full payment of registration fees. **Make checks payable to ISPA.**

Wire Transfer Date of Transfer _____
Contact registration@ispag.org for wire transfer instructions.

Charge my credit card for US\$ _____

American Express Discover MasterCard VISA

All information below is required for credit cards:

CARD # _____

EXP. DATE _____ V-CODE _____
(3 or 4 digit verification code on back of card)

SIGNATURE _____

PRINTED NAME OF CARDHOLDER _____

E-MAIL ADDRESS ASSOCIATED WITH CREDIT CARD _____

EASY CONFERENCE REGISTRATION

Online: www.ispag.org/icpa

By Email: Fill out the form with your credit card information, sign and email it to registration@ispag.org

By Mail: Send registration form with payment to: ICPA Registration, 109 East Main Street, Monticello, IL 61856

Questions: PAQ Interactive, Phone: +1-217-762-7955, E-mail: registration@ispag.org

Refund Policy: Cancellations received by 3 July 2024 entitle the registrant to refund of half the registration fee. No refunds for no-shows or cancellations received after 3 July 2024. Substitutes are welcome.