



**SPECIAL INVITATION:  
FREE ONE-DAY  
EXHIBIT HALL PASS**

**COMPLETELY FILL OUT THIS REGISTRATION FORM**

**SPECIAL INVITATION COMPLIMENTS OF:** Sensor Networks, Inc.

ASNT Member Number: \_\_\_\_\_ Non-member:  First-Time attendee:

Last Name \_\_\_\_\_ First \_\_\_\_\_

Company Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip+4/Postal Code Country \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Email \_\_\_\_\_

1. Years of Experience in NDT  0-5  6-10  11-15  16-20  21 & over

2. Your Job Function—Choose the one which best describes your role. (Select all that apply)

- NDT Management
- Sales/Marketing
- Quality Management
- Researcher
- Engineer
- Academic/Educator
- Technician/Inspector
- Trainer/Instructor
- Consultant
- Student

3. Purchasing Responsibility (Select all that apply)

- I recommend/approve purchase of equipment/instruments/supplies
- I recommend/approve purchase of training & study materials/programs
- I recommend purchase of services
- I am not involved in purchasing

4. With which NDT method(s) do you work? (Select all that apply)

- |  |   |
|--|---|
| <input type="checkbox"/> Acoustic Emission                     | <input type="checkbox"/> Radiography        |
| <input type="checkbox"/> Liquid Penetrant                      | <input type="checkbox"/> Infrared & Thermal |
| <input type="checkbox"/> Alternating Current Field Measurement | <input type="checkbox"/> Ultrasonics        |
| <input type="checkbox"/> Magnetic Flux Leakage                 | <input type="checkbox"/> Laser              |
| <input type="checkbox"/> Magnetic Particle                     | <input type="checkbox"/> Vibration Analysis |
| <input type="checkbox"/> Electromagnetic/Eddy Current          | <input type="checkbox"/> Leak               |
| <input type="checkbox"/> Neutron Radiography                   | <input type="checkbox"/> Visual             |
| <input type="checkbox"/> Ground Penetrating Radar              |   |

5. Choose the one business industry segment that best describes your company. (Select all that apply)

- |  |   |
|--|---|
| <input type="checkbox"/> Aerospace/Aviation/Aircraft               | <input type="checkbox"/> Medical        |
| <input type="checkbox"/> Amusement Rides & Skiing                  | <input type="checkbox"/> Nuclear        |
| <input type="checkbox"/> Automotive                                | <input type="checkbox"/> Optical        |
| <input type="checkbox"/> Chemical & Petroleum                      | <input type="checkbox"/> Ordnance       |
| <input type="checkbox"/> Construction                              | <input type="checkbox"/> Pipeline       |
| <input type="checkbox"/> Commercial Labs                           | <input type="checkbox"/> Pulp/Paper     |
| <input type="checkbox"/> Infrastructure (Roads & Bridges)          | <input type="checkbox"/> Railroad       |
| <input type="checkbox"/> Electronics                               | <input type="checkbox"/> Semi-Conductor |
| <input type="checkbox"/> Marine                                    | <input type="checkbox"/> Utilities      |
| <input type="checkbox"/> Computer Hardware                         | <input type="checkbox"/> Research       |
| <input type="checkbox"/> Computer Software                         | <input type="checkbox"/> Robotics       |
| <input type="checkbox"/> Consulting                                | <input type="checkbox"/> Supplies       |
| <input type="checkbox"/> Distributor/Manufacturers' Representative | <input type="checkbox"/> Training       |
| <input type="checkbox"/> Equipment                                 |   |

6. Choose the primary type of application of NDT that you do? (Select all that apply)

- |  |   |
|--|---|
| <input type="checkbox"/> Design and Failure Analysis                               | <input type="checkbox"/> Product Life Extension |
| <input type="checkbox"/> Field Inspection  | <input type="checkbox"/> QA/QC Reliability      |
| <input type="checkbox"/> Incoming Inspection                                       | <input type="checkbox"/> None of the above      |
| <input type="checkbox"/> In-service, Plant/Operation Maintenance & Process Control |   |

Complete and fax to 614/274-6899 or bring to the registration desk at the Conference.  
  
Reception in exhibit hall on Sunday free to all.  
  
Lunch in the exhibit hall on Monday and Tuesday is not provided with this registration.  
  
Tickets for lunch each day can be purchased for \$25.00 per day at the registration desk.