

94TH SHOCK AND VIBRATION SYMPOSIUM

NOVEMBER 3 - 7 | DALLAS, TX

EVENT REGISTRATION FORM

| SECTION I: ATTENDEE INFORMATION | | | | | | | | | | | |
|---|-------------------|--|-----------------------------|--|--|--|--|--|--|--|--|
| Name: | | | Company: | | | | | | | | |
| | (Prefix, Fir | st Name, Last Name; as it should appear on badge) | | | | | | | | | |
| Address 1: | | | Address 2: | | | | | | | | |
| City: | | State: | Zip Code: | Country: | | | | | | | |
| Email: | | | Phone: | | | | | | | | |
| Lindii. | | email to be added to distribution list? | | | | | | | | | |
| | | | | | | | | | | | |
| SECTION II: EVENT REGISTRATION TYPE* | | | | | | | | | | | |
| | \$995 Stan | dard Registration (\$1095 after Sept. 15) | | \$0 Exhibit Hall ONLY (No technical content) | | | | | | | |
| | | ation (Tutorial Instructors & Corp. Supporters ONLY) | | Other (please note): | | | | | | | |
| | | ergraduate Student Fee | ADD Tutorials below | | | | | | | | |
| | | *There is a \$250 cancellation fee for all registro | ntions cancelled afte | | | | | | | | |
| | | | | | | | | | | | |
| SECTION III: TUTORIAL REGISTRATION Choose only ONE tutorial per time slot. Price includes course notes (if applicable) and a Certificate of Completion. Abstracts available online. | | | | | | | | | | | |
| SUNDAY, NOVEMBER 3 10:00am - 4:00pm | | | | | | | | | | | |
| | \$250 | MIL-DTL-901E Shock Training | | Kurt Hartsough | | | | | | | |
| | | - | | hart har bough | | | | | | | |
| MONDAY, N | | H 8:00am - 11:00am MIL-DTL-901E Shock Qualification Testing | | Kurth Hautaaurah | | | | | | | |
| | \$250 \$250 | | | Kurt Hartsough | | | | | | | |
| | \$250 | Fundamentals of Sine and Random Shaker Testing | | Chris Sensor | | | | | | | |
| | \$250 \$250 | Pyroshock Testing | | Dr. Vesta Bateman | | | | | | | |
| | 3230 | Analysis for a Medium Weight Shock Test | | Josh Gorfain | | | | | | | |
| MONDAY, NOVEMBER 4 11:30pm - 2:30pm | | | | | | | | | | | |
| | \$250 | MIL-DTL-901E Shock Qualification Testing Extensions | | Kurt Hartsough John Hiatt | | | | | | | |
| | \$250 | Data Integrity | | | | | | | | | |
| | \$250 | Intro. to Aliasing, FFT, Filtering, SRS & More for FEA Users & Test E | ngineers | Dr. Ted Diehl | | | | | | | |
| | \$250 | Effective Solutions for Shock and Vibration Control | Alan Klembczyk & Ken Lussky | | | | | | | | |
| | \$250 | Fundamentals of Classic Shock and SRS Shaker Testing | Chris Sensor & Bob Metz | | | | | | | | |
| MONDAY, NOVEMBER 4 3:00pm - 6:00pm | | | | | | | | | | | |
| | \$250 | MIL-DTL-901E Subsidiary Component Testing & Alternate Test Ver | icles | Kurt Hartsough | | | | | | | |
| | \$250 | DDAM 101 | | Jerry Hill | | | | | | | |
| | \$250 | Air Blast & Cratering: The ABC's of Explosion Effects in Air & on La | Denis Rickman | | | | | | | | |
| | \$250 | Digital Signal Processing - Filtering and the Fourier Transform (going from Time to Frequency Domain) | | | | | | | | | |
| TUESDAY, NOVEMBER 5 8:00am - 11:00am | | | | | | | | | | | |
| | \$250 | Underwater Bulk Charge Weapon Effects (LIMITED DISTRIBUTION | D) | Greg Harris | | | | | | | |
| | \$250 | Blast Pressure Measurement | | Troy Skinner, Denis Rickman, & Bob Metz | | | | | | | |
| | \$250 | MIL-DTL-901E Engineering Topics | | Domenic Urzillo | | | | | | | |
| | \$250 | Removing the Boundary Condition Hobgoblins in Vibration Qualifie Techniques | cation Testing with Mo | odal Troy Skousen & Randy Mayes | | | | | | | |
| WEDNESDAY, NOVEMBER 6 3:30pm - 6:30pm | | | | | | | | | | | |
| | \$250 | Shock Test Failure Modes | | Kurt Hartsough | | | | | | | |
| | \$250 | Mission Synthesis: From Field Data to Shaker Reference Profiles | | Umberto Musella & Chris Sensor | | | | | | | |
| | \$250 | Introduction to Weapons Effects and Ship Survivability Analysis | | Jan Czaban | | | | | | | |
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SECTION IV: PAYMENT INFORMATION

| Check | Check Number: | Remit to PO Box 165, Arvonia, VA 23004 | | | TOTAL DUE: |
|-------------|---------------------------|--|------------|---|------------|
| Credit Card | ¢ | | | | |
| VISA | Credit Card Number: | | Exp. Date: | / | Ŷ |
| мс | CVV (3 or 4 Digits): | | Zip Code: | | _ |
| AMEX | Cardholder Email Address: | | | | _ |

RETURN COMPLETED FORM BY EMAIL TO ASHLEY.SHUMAKER@SAVECENTER.ORG OR FAX TO 434.581.3037 DON'T FORGET TO COMPLETE AND RETURN THE SECURITY FORM TO ACCESS LIMITED DISTRIBUTION SESSIONS, IF ELIGIBLE.