

# **Wind Turbine Tribology Seminar**

Hosted by the National Renewable Energy Laboratory

National Wind Technology Center

November 15-17, 2011

**Meeting Location:** Renaissance Boulder Flatiron  
500 Flatiron Boulevard  
Broomfield, CO 80021  
303-464-8400 or 888-825-3167  
[www.renaissanceflatiron.com](http://www.renaissanceflatiron.com)

**Attendance:** Please indicate which days you plan to attend

I will attend the following days:  Nov. 15  Nov. 16  Nov. 17

## ***Personal Information:***

First, Middle Initial, Last Name: \_\_\_\_\_  
Job Title: \_\_\_\_\_  
Affiliation: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State/Province: \_\_\_\_\_  
Country: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_  
US Citizen?  Yes  No Country: \_\_\_\_\_

**If you are not a U.S. citizen, please complete the following information so we may prepare the necessary documents prior to your arrival at the National Wind Technology Center. You will be required to present your Visa, Passport and another valid form of identification prior to being admitted to the NWTC. Please be aware that if you do not have these documents with you, you will be denied entry.**

Country(s) of Citizenship: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Place of Birth: \_\_\_\_\_  
Gender: \_\_\_\_\_ M \_\_\_\_\_ F Permanent Resident: \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_

## **Visitor/Assignee's Employer Information**

Employer, Institution, or Organization represented: \_\_\_\_\_  
Employer/Institute/Organization Country: \_\_\_\_\_  
Employer/Institution/Organization Address: \_\_\_\_\_

## **Visa & Passport Information**

Visa Type: \_\_\_\_\_ J-1 Other: \_\_\_\_\_  
Visa Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_  
Visa Status Remarks: \_\_\_\_\_  
Passport Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_  
Issuing Country: \_\_\_\_\_

**Provisions:** Continental breakfast, Lunch, as well as Morning and Afternoon breaks will be provided for each day. Please indicate if you will require a vegetarian meal for lunch.

I will require a vegetarian meal: \_\_\_\_\_Yes\_\_\_\_\_ No\_\_\_\_\_

**Please submit this registration form no later than 08 November 2011 to:**

Beverly Cisneros  
NREL's National Wind Technology Center  
1617 Cole Boulevard, MS 3811  
Golden, CO 80401  
**Phone:** (303)-384-6979  
**Fax:** (303)-384-6950  
**E-Mail:** [Beverly.cisneros@nrel.gov](mailto:Beverly.cisneros@nrel.gov)