



# AAAE RATES & CHARGES SURVEY REPORT ORDER FORM



**2002-2003 AAEE Rates and Charges Survey Report\* – 03RATES**

- Non-participating Commercial Airport - **\$300**     AAEE Corporate Member - **\$500**     Non-Member - **1,000**  
 Non-participating GA Airport - **\$200**

**2003-2004 AAEE Rates and Charges Survey Report\* – 04RATES**

- Non-participating Commercial Airport - **\$325**     AAEE Corporate Member - **\$525**     Non-Member - **1,050**  
 Non-participating GA Airport - **\$200**

**2004-2005 AAEE Rates and Charges Survey Report\* – 05RATES**

- Non-participating Commercial Airport - **\$375**     AAEE Corporate Member - **\$550**     Non-Member - **1,100**  
 Non-participating GA Airport - **\$275**

**2005-2006 AAEE Rates and Charges Survey Report\* – 06RATES**

- Non-participating Commercial Airport - **\$475**     AAEE Corporate Member - **\$650**     Non-Member - **1,150**  
 Non-participating GA Airport - **\$300**

**AAEE Rates and Charges Survey Report Bundle\* – RATES\_BUNDLE**

*(Includes access to all four available reports above)*

- Non-participating Commercial Airport - **\$595**     AAEE Corporate Member - **\$850**     Non-Member - **1,500**  
 Non-participating GA Airport - **\$395**

**\*All orders include online access ONLY – printed copies are extra and are available for FY'2003 and FY'2004 reports**

- I would also like a printed copy of the report – additional **\$150 per report** (\$100 for participating airports) includes shipping and handling

**Shipping and Billing Information** (Please type or print all information)

Name \_\_\_\_\_

Title \_\_\_\_\_

Airport/Company \_\_\_\_\_

Three Letter Airport Identifier *(if applicable)* \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State/Country \_\_\_\_\_ Zip \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_

\*\*E-mail address \_\_\_\_\_

AAAE Member No. *(if applicable)* \_\_\_\_\_

- I would like to be contacted about upcoming AAEE meetings and promotions by email.
- \_\_\_\_\_
- My airport would like to contribute to the next iteration of the survey.

**\*\*Important Note:** Purchasers of the survey will have a "User ID" and "Password" issued to them by AAEE via the email address submitted on this form.

**Method of Payment**

- Purchase Order # \_\_\_\_\_  
 Check enclosed (made payable to AAEE)  
 Please charge my (check one):  
 Visa  
 MasterCard  
 American Express

Mail or Fax to: **AAAE Marketplace**  
**601 Madison Street**  
**Alexandria, VA 22314**  
**phone: (703) 824-0500 ext. 183**  
**fax: (703) 820-1395**  
**E-mail: alex.gertsen@aaae.org**

Total Purchase \$ \_\_\_\_\_

Card Number \_\_\_\_\_ Expiration \_\_\_\_\_

Date \_\_\_\_\_ Signature \_\_\_\_\_

Name as it appears on card \_\_\_\_\_