

# WSTDA 2008 Spring Meeting

May 18-21, 2008 • Hyatt Regency Newport • Newport, Rhode Island

**REGISTRATION DEADLINE : APRIL 18, 2008**

**Please type or print. Photocopy form for additional registrants.**

Please check one:  Affiliate  Associate  Regular  Non-Member

Company Rep. \_\_\_\_\_ Badge Nickname \_\_\_\_\_ 1st conference? Y N

Company \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

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

E-mail \_\_\_\_\_

If we have questions, who may we call? \_\_\_\_\_

Spouse Name \_\_\_\_\_ Badge Nickname \_\_\_\_\_

Child Name \_\_\_\_\_ Age \_\_\_\_\_

Child Name \_\_\_\_\_ Age \_\_\_\_\_

Golf Handicap(s) (for golf tourney participants): \_\_\_\_\_



**READ BELOW BEFORE FILLING OUT FORM:**

Please type or print information as you want it to appear on your badge. Photocopy this form for additional registrants. No phone registrations accepted. Payment must accompany this form.

EVENT	COST	COMPANY REP.	SPOUSE/COMPANION	CHILD 1	CHILD 2
Member representative	\$395				
Non-member representative	\$595				
Spouse/Companion	\$225				
Children	6-12 years \$100				
	13-17 years \$125				
Late Registration Fee (after 4/18/08) per form	\$100				
Golf Tournament (Tuesday, May 20, 2008)	\$225				
Scenic Tour (Tuesday, May 20, 2008)	\$99				
Welcome Reception Sponsor (Optional)	\$1,000				
Platinum Conference Sponsor (Optional)	\$1,000				
Gold Conference Sponsor (Optional)	\$500				
Silver Conference Sponsor (Optional)	\$350				
Bronze Conference Sponsor (Optional)	\$200				
Fees Due for Each Attendee		\$	\$	\$	\$
Total Amount Due	\$ _____				

**Registration Fees**

- Member ..... \$395
- Non-Member ..... \$595
- Spouse/companion ..... \$225
- Child (under 6 yrs.) ..... Free
- Child (6-12 yrs.) ..... \$100
- Child (13-17 yrs.) ..... \$125

\$100 late registration fee applies after 4/18/08.

Registration fee covers all business sessions, conference materials and all scheduled meal functions.

**Disability**

If you have a disability or dietary need and require special accommodation in order to fully participate in this event, please check the box on the left. Attach a written description of needs. We can only provide access if we have prior knowledge.

**Cancellation Policy**

All cancellations must be in writing. No refunds will be made after April 25, 2008. Cancellations prior to April 25, 2008 will be charged a \$75 administrative fee. It is your responsibility to cancel hotel reservations.

**PAYMENT**

**No phone registrations. Payment must accompany this form.**

- Check (payable to WSTDA)  VISA  MasterCard  AmEx

Credit Card # \_\_\_\_\_ Expiration Date \_\_\_\_\_

Billing Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Cardholder Name \_\_\_\_\_ Signature \_\_\_\_\_

**Return this form with payment in U.S. funds to WSTDA**

2105 Laurel Bush Rd., Suite 200, Bel Air, MD 21015 • (443) 640-1070 • Fax: (443) 640-1031