

WSTDA 2004 Mid-Year Meeting

November 7-9, 2004 • Loews L'Enfant Plaza Hotel • Washington, DC



REGISTRATION DEADLINE: OCTOBER 7, 2004

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

PERSONAL INFORMATION

Company Rep. _____ Nickname _____

Company _____

Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____

E-mail _____ 1st conference? Yes No

If we have questions, who may we call? _____

Spouse/Companion Attending? Yes No

Spouse/Companion Name _____ Nickname _____

SPONSORS

Do you want to increase your exposure at WSTDA's Mid-Year Meeting? Are you unable to attend but want to make sure you are still represented? Take advantage of these sponsorship opportunities to show your support for WSTDA and the industry. **Each sponsor will be highlighted throughout the meeting. Signage will be displayed at the meeting and you will be listed in WSTDA's newsletter.**

Sponsorship Levels

Platinum - \$500 Gold - \$400 Silver - \$300 Monday's Member Outing - \$250

REGISTRATION INFORMATION

EVENT	COST	Company Rep.	Spouse/Companion
Member Representative	\$250		
Non-member Representative	\$335		
Spouse/Companion	\$125		
Member Outing (Optional)	\$35		
Fees Due for Each Attendee		\$	\$
Sponsorship	\$		
Total Amount Due	\$		

PAYMENT

No telephone registrations accepted. 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 to WSTDA • 2105 Laurel Bush Rd., Suite 200, Bel Air, MD 21015
(443) 640-1070 • Fax: (443) 640-1031 • www.wstda.com

**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.

Registration Fees

Member \$250
Non-member \$335
Spouse \$125
Member Outing .. \$35

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 October 7, 2004. Cancellations prior to October 7 will be charged a \$75 administrative fee.

Sponsors

Please consult your tax advisor on the tax deductibility of your sponsorship.