



# ANNUAL CONVENTION & EXPO REGISTRATION FORM

APRIL 18–21, 2018 • MANDALAY BAY RESORT & CASINO  
LAS VEGAS, NEVADA • WWW.ICCFACONVENTION.COM

Full Name \_\_\_\_\_ Nickname for Badge \_\_\_\_\_

Guest \_\_\_\_\_ Nickname for Guest \_\_\_\_\_

Company \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State/Prov \_\_\_\_\_ Zip/Postal Code \_\_\_\_\_

Phone \_\_\_\_\_ Cell phone (for text messages) \_\_\_\_\_

Email \_\_\_\_\_

Emergency Contact Name \_\_\_\_\_ Emergency Contact Phone \_\_\_\_\_

Is this your first time attending the ICCFA Annual Convention & Expo?  Yes  No    Are you a graduate of ICCFA University?  Yes  No

Are you a veteran?  Yes  No

If yes, please indicate branch of military:  Air Force  Army  Coast Guard  Marine Corp  Merchant Marine  Navy

Indicate if you are a:  CCE     CCrE     CFuE     CCFE     CSE     CPLP     CFSP     CCCE

Are you a:  Owner  Manager  Staff

Check if you are a member of:  JFDA     PLPA

What level of authority do you hold for making purchasing decisions?  Make recommendations     Final authority     None

If you have a disability that requires special accommodation, please check this box and attach a statement of your needs.

## REGISTRATION AND PAYMENT

### REGISTRATION RATES

	By 03.16.18	After 03.16.18	Amount Due
Full registration: ICCFA Member	\$550	\$590	\$ _____
Full registration: Non-Member	\$700	\$730	\$ _____
Guest **	\$250	\$250	\$ _____
ICCFA Member Supplier	\$650	\$690	\$ _____
Non-Member Supplier	\$850	\$890	\$ _____
<b>Ticketed Events</b>			
Educational Foundation Reception		\$50 each	\$ _____
State Association Luncheon		\$65 each	\$ _____
Closing Reception/Dinner *		\$150 each	\$ _____
<b>Total Due</b>	<b>\$</b>		<b>\$ _____</b>

Check

Discover     Visa     MasterCard     AmEx

Credit card # \_\_\_\_\_

Exp. date \_\_\_\_\_ \* Security ID # \_\_\_\_\_

Name on credit card \_\_\_\_\_

Card's billing address (required) \_\_\_\_\_

Signature \_\_\_\_\_

\* 3-digit number on back of card or 4-digit number on front of AmEx card

**Registration and Optional Events Cancellation Policy:** Cancellations must be received in writing via fax, email to [jaelyn@iccfa.com](mailto:jaelyn@iccfa.com) or mail to ICCFA no later than March 16, 2018 to receive a refund. Full registrations are subject to a \$100 cancellation fee per registration. Optional events are subject to a \$10 cancellation fee per ticket. No-shows will not receive a refund. No refunds will be given after March 16, 2018. If you register after the early bird cut-off date, your name may not appear in the printed pre-registration directory.

Note: A Closing Dinner ticket is included in each full registration you purchase, including Guest

\*\* A Guest must be someone who does NOT work in the industry

Please return this form with payment to: ICCFA Meetings Department • 107 Carpenter Drive, Suite 100 • Sterling, VA 20164 • Fax 703.391.8416