

FPDA REGISTRATION FORM

FPDA/ISD JOINT INDUSTRY SUMMIT SEPT. 20 - 23, 2015 NEW ORLEANS MARRIOTT, NEW ORLEANS, LA

**SUBMIT ONE
FORM FOR
EACH COMPANY
REPRESENTATIVE**

FPDA Membership Type: (please select one) ☐ Distributor ☐ Associate Manufacturer ☐ Vendor Associate ☐ Publication

Non-Member Type: (please select one) ☐ Distributor ☐ Manufacturer **Are you a first-time attendee?** ☐ Yes ☐ No

Are you a Young Executive? (Age 40 or younger) ☐ Yes ☐ No

REGISTER 4 WAYS



BY MAIL: FPDA
105 Eastern Ave., Suite 104, Annapolis, MD 21403



BY FAX:
(410) 263-1659



BY EMAIL:
info@fpda.org



ONLINE:
www.fpda.org

Name _____ Badge Name _____

Company Name _____ Title _____

Company Address _____

City _____ State/Province _____ Zip/Postal Code _____ Country _____

Email _____ Phone _____ Fax _____

Spouse/Companion Name (if attending) _____ Badge Name _____

Do you plan to attend the Spouse/Companion Tour & Luncheon (free w/ registration) ☐ Yes ☐ No

Emergency Contact Name _____ Phone _____

REGISTRATION FEES	MEMBER		NON-MEMBER		SPOUSE/COMPANION	TOTAL
	BY 8/5/15	AFTER 8/5/15	BY 8/5/15	AFTER 8/5/15		
Distributor Member	\$895	\$995	\$1395	\$1495		\$
Associate & Affiliate Member	\$895	\$995	\$1395	\$1495		\$
Supplier Showcase Table** (Mon. 9/21)	\$800	\$800	\$800	\$800		\$
Spouse/Companion Registration*					\$350	\$
Golf Tournament (Tues. 9/22)	\$195	\$195	\$195	\$195	\$195	\$
Golf Handicap/Average						
Shoe Rental size: _____	\$10	\$10	\$10	\$10	\$10	\$
Club Rental <input type="checkbox"/> left <input type="checkbox"/> right	\$65	\$65	\$65	\$65		\$
Club Rental-Spouse/Companion <input type="checkbox"/> left <input type="checkbox"/> right					\$65	\$
Golf Pairing: I'd like to play with _____	Handicap _____					
Golf Pairing-Spouse/Companion: I'd like to play with _____						

* **SPOUSE/COMPANION REGISTRATION** includes WWII Reception, and more Monday and Tuesday.

****SUPPLIER SHOWCASE:** (Open to all Associate and Affiliate Attendees) As an FPDA/ISDA Showcase Exhibitor,

we hereby contract with FPDA/ISD for an exhibit table as described in the Rules and Regulations. Table top selection will be determined on a first-come/first-serve basis. Space is limited. Register by August 20, 2015 to ensure your listing in the printed convention directory **NOTE: Each person working your table MUST BE REGISTERED FOR THE SUMMIT!**

Tours (select one)	Cost	Delegate	Spouse	Total
Cajun Critters Swamp Tour	\$65.00	\$	\$	\$
Taste of New Orleans Walking Tour	\$60.00	\$	\$	\$
French Quarter Walking Tour	\$35.00	\$	\$	\$
GRAND TOTAL				\$

SUPPLIER SHOWCASE:

Person Responsible for Table _____ Email _____

Company Name to appear on Table Top signage _____

Description for Publication of Displayed Products/Services (limit 100 words) _____

Please do not place my booth near (company name) _____

Authorized Signature _____

PAYMENT Total Amount Due: \$ _____

☐ Check enclosed (payable to FPDA) Please charge my: ☐ Visa ☐ MasterCard ☐ AmEx ☐ Discover

Card # _____ Exp. date _____ Sec. code _____

Cardholder name _____ Address _____

Cardholder signature _____

Billing Address _____

Attendee Registration Policies: Please make a photocopy of this form and **submit one copy for each company representative attending** the FPDA/ISD Joint Industry Summit. Mail or fax by August 5, 2015 to obtain the early bird registration discount. Register by August 20, 2015 to guarantee listing in the official roster of attendees.

Cancellation Policies: In order to obtain a refund for convention registration fees, written notice must be received at the FPDA office, by the dates noted below:
By 8/20/15 - full refund
After 8/20/2015 - no refund