

ATTENDEE REGISTRATION FORM

Maintenance & Roadway Operations Workshop | May 21-23, 2017 | New Orleans, Louisiana

Complete the form below or register online at www.IBTTA.org/neworleans

1. ATTENDEE INFORMATION (Please complete one form per registrant.)

Contact Name _____

Title _____ Name for Badge _____

Organization _____

Email _____

Twitter Handle _____ I do not have one.

Mailing Address _____

City _____ State _____ Postal Code _____ Country _____

Mobile Phone _____ Office Phone _____

Guest Name _____ Name for Badge _____

- I am a first-time attendee. I am interested in joining IBTTA.

How did you hear about this meeting?

- Advertisement Search Engine
 Direct Mail Social Media
 Email Blast Word of Mouth
 Previous Event Other _____

2. REGISTRATION FEES (Registration fees are in U.S. dollars.)

After May 12, 2017, registrations will only be accepted on-site. If your registration is not confirmed by May 12, 2017, your name will not appear in the final registration list. Registration includes all events listed in the program.

	FEE		FEE
Delegate	<input type="checkbox"/> \$775	DBE/WBE/MBE/SBE	
Delegate Non-Member	<input type="checkbox"/> \$1,275	Member Delegate****	<input type="checkbox"/> \$600
Delegate Government*	<input type="checkbox"/> \$600	Speaker/Moderator	<input type="checkbox"/> \$400
Delegate Non-Member Government*	<input type="checkbox"/> \$900	Guest**	<input type="checkbox"/> \$375
		Media*** No Fee. Sessions only. Requires Approval.	

* Government rates apply to employees and/or members of governing body of international, federal, state, county, local and provincial governments.

** Guest refers to a spouse or personal friend, not a business associate or staff member. Guest rate includes two lunches, a reception and the Monday Evening Event.

*** Members of credentialed media are welcome to attend sessions only and must check in at IBTTA registration desk. Contact Bill Cramer, Communications Director, bcramer@ibttta.org.

**** See IBTTA.org/member-categories for eligibility. Only members can access this rate.

3. TOUR & EVENTS

TECHNICAL TOUR

Post-Katrina Storm Surge Barrier

Sunday, May 21, 2017

8:00am – 11:00am; 1:00pm – 4:00pm

# OF TICKETS	PRICE	AMOUNT
_____	\$40	_____

SUNDAY SERVICE PROJECT

Bastion Veterans Community

Sunday, May 21, 2017 | 8:00am – 4:00pm

_____	\$50	_____
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MONDAY EVENING EVENT

House of Blues

Monday, May 22, 2017 | 6:30pm – 9:30pm

_____	included in registration fee	_____
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RETURN THIS FORM ALONG WITH PAYMENT TO IBTTA

1146 19th Street NW, Suite 600

Washington, DC 20036-3725

Fax: +1 (202) 659-0500

*NEED WIRE TRANSFER INFORMATION OR A FORMAL INVOICE?

Registration and tour fees must be paid in full at the time attendees arrive at the workshop. Contact Harry Smith at hsmith@ibttta.org or (202) 659-4620 x10.

GENERAL INFORMATION

Registration fees include all functions on the official program. All employees of an agency or firm are considered "Delegates." In order for names to appear in the official printed registration list, paid registrations must be received at IBTTA by May 12, 2017.

REGISTRATION REFUND AND CANCELLATION POLICY

Full registration refunds less \$75 administrative fee will be made if cancellation is received in writing by IBTTA before May 12, 2017. No refunds will be issued after May 12, 2017. No refunds will be issued for no-shows. Substitutions are allowed at any time.

SPECIAL REQUIREMENTS

If you have special requirements, please attach a separate note of explanation.

PAYMENT SUMMARY

2 REGISTRATION FEES \$ _____

3 TOUR & EVENTS \$ _____

TOTAL DUE \$ _____

METHOD OF PAYMENT

I wish to use the credit card listed below:

Visa MasterCard American Express

Credit Card Number _____

Exp. Date _____

CVV Number _____

Name on Credit Card _____

Authorized Signature (only if paying by credit card) _____

Billing Address if Different from Attendee Information _____

- Check enclosed
 Wire Transfer Pending
 Bill Me*

NOTE: If you would like to have your professional fees billed separately from your personal fees, please contact Harry Smith at (202) 659-4620 x10 or hsmith@ibttta.org.

I have read and understand the payment and cancellation policies outlined on this form.

Signature: _____

Date: _____