



REGISTRATION FORM

American Wood Protection Association

113TH ANNUAL MEETING

Encore at Wynn Resort, Las Vegas, Nevada USA



Name of Attendee: _____
First Name Last Name Preferred first name for badge (if different)

Name of Spouse (if attending): _____
First Name Last Name Preferred first name for badge (if different)

Organization/Company: _____

Address: _____

City: _____ State/Prov: _____ Zip/PC: _____ Country: _____

Telephone: _____ Email: _____

Special Needs (diet, mobility, hearing, sight, etc.): _____

2017 AWP Annual Meeting Registration Fees (in USD)	Early Rate (By March 3)	Regular Rate (By March 24)	On-Site Rate (April 8-11)	Total Amounts
AWPA Member Registration	\$575	\$625	\$675	\$
Non-Member Registration (Please consider joining AWP for \$210 and registering at the member rate - The member rate is honored when registration form is submitted along with a membership application and approved by AWP.)	\$775	\$825	\$875	\$
Spouse/Guest Program Registration (Tour is limited to 50 participants - first come, first served)	\$175	\$200	\$250	\$
Student Registration	\$50	\$50	\$50	\$
Hacker's Classic Golf Tournament (Sunday, April 9) My handicap is: Shirt size: I wish to be paired with:	\$179	\$179	Not Available	\$
Supplier's Showcase Registration (includes a 6 foot wide table, two chairs, and full meeting registration for one person - member or non-member)	\$950	\$1100	Not Available	\$
113th Annual Meeting Commemorative Pin: Enter desired quantity here: The names of each individual contributors will be displayed on a banner at the meeting.	\$25 each	\$25 each	\$25 each	\$
Pickler's Prance 5K Fun Run/Walk: You must review and agree to the following: I, the runner/walker, understand that this event has some risk and I hereby agree to waive any claims against AWP or its members in regard to my participation in this event. <input type="checkbox"/> I agree. Name of participant: _____ Shirt size: _____	No charge	No charge	Not Available	
POLICIES: To qualify for EARLY RATE, your form and payment must be received by March 3, 2017. Pre-registration closes on March 24, 2017. If your payment will not reach us by then, you must register on-site. We're sorry, but there are NO REFUNDS if you cancel your registration for this meeting. Registration does not include hotel reservations or meals. Please contact us if you have any questions.			TOTAL AMOUNT SUBMITTED:	\$

Form of Payment: Check enclosed Visa MasterCard Discover American Express
Checks must be in U.S. funds and made payable to American Wood Protection Association, Inc. AWP is a Section 501(c)(6) corporation.

Cardholder Name: _____ Signature: _____

Cardholder Address (if different from above): _____

City: _____ State/Prov: _____ Zip/PC: _____ Country: _____

Credit Card Number: _____ Exp. Date: _____

Please complete this form and send to:
American Wood Protection Association ♠ P.O. Box 361784 ♥ Birmingham, Alabama 35236-1784 ♣ USA
Telephone: 205-733-4077 ♥ Facsimile: 205-733-4078 ♣ Email: email@awpa.com ♦ Internet: www.awpa.com