



2015 WMA Convention & Expo Registration Form

Register today by completing this registration form and returning it to WMA with full payment. For more than two registrants, please duplicate this form. Fees include admittance for one person to a Kick Off Lunch, Welcome Reception/ Expo Opening, a continental breakfast in the Expo, Annual Meeting & Luncheon, President's Dinner Dance, cocktail receptions in the Expo, and a final breakfast on check-out day, seminars, educational materials, and exhibit activities.

Cancellations

For a full refund, cancellations must be received on or before September 7, 2015; an 85% refund for cancellations received September 8 through September 18, 2015. No refunds for no-shows, cancellations or event tickets on or after September 19, 2015. Call Regina Sanchez immediately for cancellations at 916.448.7002.

Hotel Reservations

Make your hotel reservations directly with the Peppermill Reno. Reservations received after September 4 will be accepted on a space-and-rate-availability basis. You can find the link at wma.org/conv2015. Go to the Room Reservations, then click on Group Name.

First Time Convention Attendee

This is my first time at a WMA Convention.

Special Dietary Needs

Check if you require special dietary meals. A WMA representative will contact you.

Travel

We suggest that you try to book your flights in advance so that you can enjoy discounted rates with airlines such as Southwest Airlines (southwest.com or 800.435.9792) or websites that offer discounted airfares such as expedia.com or travelocity.com. WMA has negotiated special meeting rates with Hertz for car rentals during Convention at all California and Nevada locations. For reservations, call Hertz at 800.654.2240 and refer to CV#02RE0028.

Go ONLINE to wma.org/conv2015

MAIL OR FAX

this completed form to:

WMA

455 Capitol Mall, Suite 800

Sacramento, CA 95814

916.448.7002 telephone

916.448.7085 fax

Badge Name #1 _____

Badge City _____

Badge Name #2 _____

Badge City _____

Community/Firm Name _____

Member ID# _____

Address _____

City, State, ZIP _____

Daytime Telephone Number _____

Fax Number _____

FULL Email Address (example: name@wma.org) _____

CHECK ONE:

- Member - Owner
 Member - Manager
 Member - S&I
 Exhibitor
 Non-Member
 Allied Assn

RIBBON CODE (Check all that apply):

- Board Member
 Chapter President
 Committee Chair
 Committee Member
 Speaker

EXPO REGISTRATION FEES

(Fees listed below are per person rates)

	BEFORE SEPT 9	ON or AFTER SEPT 10		
Member	\$425 pp	\$495 pp	x _____ (total registrants) = \$ _____	
Non-Member	\$850 pp	\$990 pp	x _____ (total registrants) = \$ _____	
Total Convention & Expo Registrations Due				(A) \$ _____

Benefits for the Frank J. Evans Foundation • Monday, October 12, 2015

GOLF

All fees listed are per person and due by September 5. Space is limited.

Golf Tournament \$150 per person x _____ (total participants) = \$ _____

I will need transportation to/from the golf course. I can drive _____ golfers to/from the course.

Pairings request: _____ Handicap: _____

Total Golf Due (B) \$ _____

FJE Cash Drawing Donation

Yes, I wish to donate \$100 \$250 \$500 toward the "seed money" for the cash drawing! (This is not a ticket for the drawing.) = \$ _____

Total FJE Cash Donation (C) \$ _____

GRAND TOTAL DUE (A + B + C) \$ _____

Networking No-Host Cocktail Reception • Monday, October 12, 2015 • 6:00 p.m.

Yes, I/we plan to attend the networking event. Total number of people attending: _____

Check enclosed (make payable to WMA) or charge to VISA MasterCard AMEX Discover

Cardholder's Name _____

Account # _____

Security Code _____ Expires _____ / _____

Billing Address _____ ZIP _____

Signature _____ Email* _____

(*Providing your email address guarantees you an immediate receipt of your charges.)