



Registration Form

2017 AWPA FALL TECHNICAL COMMITTEE MEETINGS
DECEMBER 12-16, 2017

MARGARITAVILLE HOTEL & MARINA ☀ KEY WEST, FLORIDA USA



I PLAN TO ATTEND THE FOLLOWING TECHNICAL COMMITTEE MEETINGS

- P-1 P-3 P-4 P-5 P-6 P-8 P-9
 S-2 S-3 S-8
 T-1 T-2 T-3 T-4 T-7 T-8

ATTENDEE INFORMATION

Name of Attendee _____ (as you want it to appear on badge)

Name of Spouse/Guests (\$50 per person to attend all receptions) _____

Organization _____

Address _____

City _____ State/Prov. _____ ZIP/PC _____

Country _____ Email _____

Telephone _____ Fax _____

Special Needs (food allergies, sight, hearing, mobility, etc.) _____

REGISTRATION FEES in U.S. Dollars

AWPA Member Rate

Non-Member Rate*

Early Registration (payment received on or before October 31)	\$275	\$375
Pre-Registration (payment received November 1 - 21)	\$350	\$450
On-Site Registration (December 12 - 16)	\$400	\$500
Spouse/Guest Registration (to attend receptions)	\$50	\$50

NOTE: NO REFUNDS WILL BE ISSUED FOR CANCELLATIONS.

* Please consider applying for membership (through the end of 2017) to take advantage of AWPA member rates. The member rate will be honored if accompanied by a membership application and if the membership is approved. www.awpa.com/membership/index.asp

PAYMENT INFORMATION

Enclosed is a personal or company check in the amount of \$ _____ USD drawn on a U.S. bank.

Please charge \$ _____ to my credit card: Visa Master Card Discover American Express

Cardholder Name _____ Signature _____

Cardholder's Address (if different from above) _____

City _____ State/Prov. _____ Zip/PC _____

Country _____ Telephone _____

Credit Card Number _____ Exp. Date _____

 *American Wood Protection Association* 

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