

UASD 29th ANNUAL CONVENTION

Attendee Registration Form

Please complete a separate registration form for each attendee

Davis Conference Center, Layton, Utah

November 1, 2, and 3, 2017

Visit our website at uasd.org for additional convention details

Attendee Name:	1	Title:				
District Name:						
Mailing Address:						
City:	5	State:		Zip:		
Phone:	F	Fax:				
Attendee Email:			Website:			
District Member Status: UASD Member Non-Member						
Please designate the meal functions/events you plan to attend						
November 1 st D Evening TAILGATE event						
	Awards Banquet Partners Program					
November 3 rd D Breakfast		Vegetarian Special Needs:				
Spouse/Partner Name:	1	Title: Spouse Partner				
Please designate the meal functions/events your spouse/partner plans to attend						
November 1 st D Evening TAILGATE event						
November 2 nd 🗆 Continental Breakfast 🛛 Luncheon 🗆 Awards Banquet 🗆 Partners Program						
November 3 rd Breakfast		Vegetarian Special Needs:				
Wednesday – Friday Registration: (Full convention registration)	(Early Bird (on or before Sept. 15)	Regular	Late (after Oct. 6)	SUBTOTAL	
UASD Member District Attendee - Full Convention		\$220	\$250	\$285		
UASD Member District Guest - Full Convention (Spouse/Partner with UASD Member)		\$35	\$35	\$35		
Non-member District Attendee - Full Convention		\$370	\$405	\$430		
Non-member District Guest - Full Convention (Spouse/Partner with Non-Member))	\$65	\$65	\$65		
. Wednesday ONLY Registration : (Ideal for staff or board members attending one-day training only	ly) (Early Bird (on or before Sept. 15)	Regular	Late (after Oct. 6)	SUBTOTAL	
UASD Member District Attendee - Wednesday sessions ONLY	ç	\$60	\$70	\$80		
Non-member District Attendee - Wednesday sessions ONLY		\$90	\$100	\$110		
GRAMA TRAINING for Records Officers Attendee - Wednesday ONLY		\$20 member		\$40 non-mbr		
				TOTAL		
Payment Type: Check VISA MasterCard AMEX Discover Other						
Name on Card: Card Number:						
Authorized Signature: Security Code:						
Email address to receive receipt: Expirati			on Date:			
Credit Card Billing Address:						
Please enclose a check or include credit card information with this form and return to the UASD						

FULL CONVENTION REGISTRATION
Includes:Cancellation policy:
Cancellations must be written and received• All convention materials and Wednesday Tailgate eventno later than October 6th. Such cancellations will be refunded,
less a \$25 processing fee. Substitutions may be made and• Wednesday, Thursday, and Friday sessions and breakoutsless a \$25 processing fee. Substitutions may be made and
must be in writing. Please submit written cancellation• Thursday continental breakfast, luncheon with Keynote speakerno tice or substitution request to uasd@uasd.org, or• Friday breakfast, special speaker, and legislative overviewtransmit via fax to 855-313-2360.

HOTEL ROOM RESERVATIONS Call <u>Hilton Garden Inn at 877-782-9444.</u> Mention that you are registering for the Utah Association of Special Districts Convention to receive the discounted room rate of \$99 per night. The group-discount rate is available through Friday, October 6th, based on room-block availability. Make your reservations today!

1272 West 2700 South, Syracuse, UT 84075, Phone: (801) 614-0405 Cell: (801) 725-1312 Fax: (855) 313-2360 email: uasd@uasd.org website: www.uasd.org