

2020 Legal Affairs Seminar Westin San Diego Gaslamp Quarter February 23-25, 2020

Mail to: APTA 1300 I Street, NW Suite 1200 East Washington, DC 20005 Email: meng@apta.com

| Registrant Information (one registrant per form) | | | | |
|--|------------------------------|---------------------------------|---|--|
| Name: (First) | (Mid | ldle Initial) (Last) | | |
| Badge Name (if different from above): | | | | |
| Title: | | | | |
| Organization: | | | | |
| Mailing Address: | | | | |
| City: | State/Prov | 7.: Zip | Country: | |
| Telephone: | Ema | ail: | | |
| Spouse/Guest (if attending)(additional fee required: see below) | | | | |
| | | | | |
| □ Please indicate below if you have special dietary needs or require accessibility accommodation. | | | | |
| | | | | |
| Registration Fees: (select one) | | | | |
| | | | | |
| Registration Category | Early-Bird Rate (by 1/17/20) | Standard Rate (after 1/17/20) | Onsite Rate (2/23 – 2/25)_ | |
| Member Non-Member | □ \$695 □ \$2,000 | □ \$745 □ \$2,000 | □ \$820 □ \$2,075 | |
| Federal Government | | □ \$2,000 □ \$500 | □ \$2,075 □ \$575 | |
| Spouse/Guest | | L 4000 | | |
| Includes Sunday & Monday receptions only. Not applicable to fellow employees or industry professionals. | | | | |
| No fee Category – Selecting one of the categories listed below requires pre-approval from APTA or additional verification. Please note that you will have limited access to the conference, including no meals. If you would like to have full access to the conference, please select one of the registration categories above. Media -must be approved by APTA by emailing cchitwood@apta.com Speaker -valid only for session(s) in which you are presenting Student -copy of valid student ID must accompany this form | | | | |
| Payment Summary | | Cancellation Policy | | |
| Registrations paid by check will <i>NOT</i> be processed without full payment. To pay by credit card, register online at <u>www.apta.com</u> | | Registration fees will be refur | Registration fees will be refunded, minus a 20% cancellation fee if a request is received in writing and post-marked no later than | |
| □ Check – Include this form with your payment | | | February 4, 2020. There will be no refunds after the | |
| □ I would like to apply a credit from a previous meeting. (Attach credit letter with this registration form) | | | By completing and submitting this registration form, I agree to the registration deadlines and cancellation policy. | |
| Registration Fee(s): \$ | | | | |
| Spouse/Guest Fee: \$_ | | | | |
| Total: \$_ | | | | |