



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)** _____ **(Middle Initial)** _____ **(Last)** _____

Badge Name (if different from above): _____

Title: _____

Organization: _____

Mailing Address: _____

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

Telephone: _____ Email: _____

Spouse/Guest (if attending) _____

(additional fee required: see below)

Please indicate below if you have special dietary needs or require accessibility accommodation.

Registration Fees

Fee Category	Early-Bird Rate (by 3/6/23)	Standard Rate (after 3/6/23)	Onsite
<input type="checkbox"/> Member	<input type="checkbox"/> \$795	<input type="checkbox"/> \$845	<input type="checkbox"/> \$920
<input type="checkbox"/> Non-Member	<input type="checkbox"/> \$2,000	<input type="checkbox"/> \$2,000	<input type="checkbox"/> \$2,100
<input type="checkbox"/> Federal Gov/Univ Faculty	<input type="checkbox"/> \$500	<input type="checkbox"/> \$500	<input type="checkbox"/> \$575
<input type="checkbox"/> Spouse/Guest <i>Includes reception only.</i>	<input type="checkbox"/> \$150		

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.

- Media -**must be approved by APTA by emailing tdoyle@apta.com**
- Speaker -**valid only for session(s) in which you are presenting**
- Student -**copy of valid student ID must accompany this form**

COVID Acknowledgement

I understand and acknowledge the inherent risk of exposure to communicable disease, like Covid-19 and its variants, in any public place where people are present. I agree to release and hold harmless the American Public Transportation Association (APTA), the facilities and their employees and representatives from and against damages, liability, claims and expenses arising from the contraction or spread of disease, including but not limited to Covid-19 and its variants, due to my travel to or participation in any aspect of this APTA event. Further, I acknowledge federal, state, and local laws, orders, directives, and guidelines related to Covid-19 and its variants, including the Centers for Disease Control and Prevention guidance. I will comply with all such orders, directives, and guidelines while participating in any aspect of this APTA event including, without limitation, requirements related to hand sanitation, social distancing, and use of face coverings. I agree not to participate in any aspect of this APTA event if I am experiencing symptoms of Covid-19 or its variants (such as cough, shortness of breath, or fever), have a confirmed or suspected case of Covid-19 or its variants, or have come in contact in the last 14 days with a person who has been confirmed to have or suspected of having Covid-19 or its variants.

Payment Summary

Registrations paid by check will **NOT** be processed without full payment. To pay by credit card, register online at www.apta.com

- Check – Include this form with your payment
- I would like to apply a credit from a previous meeting. (**Attach credit letter with this registration form**)

Registration Fee(s): \$ _____

Spouse/Guest Fee: \$ _____

Total: \$ _____

Cancellation and Data Management Policies

Cancellation: Fees will be refunded by emailing your request to lhamlin@apta.com by March 10, 2023. A 20% cancellation fee will be withheld. You may transfer your fee at anytime without penalty to another person in your organization

Data Management: The American Public Transportation Association (APTA) may collect, store, and/or transmit personal identifiable information to facilitate registration services. For more information please see APTA's Privacy Policy on apta.com.

By completing and submitting this registration form, I agree to the cancellation and data management policies.