

American Public Transportation Association

2022 Legal Affairs Seminar Boston Marriott Long Wharf April 3-5, 2022 Mail to:
APTA
1300 I Street, NW
Suite 1200 East
Washington, DC 20005
Email: meng@anta.com

		1		Email: meng@apta.com
Registrant Information (one	registrant pe	r form)		
			N TO ACCESS INDOOR VI	ENUES. PLEASE VISIT THE LEGAL
AFFAIRS WEBSITE FOR MORE	E INFORMATIO	N.		
Name: (First)		(Middle)	Initial) (Last)	
		(1/224420)	(====)	
Badge Name (if different from ab	oove):			
Title:				
Organization:				
Mailing Address:				
				Country:
			_	
Telephone:		Email: _		
☐ Please indicate below if you l Registration Fees	have special die	tary needs or require	COVID Acknowledge	
11091501401011 1 005			OO VID Helinowicag	,
Registration Category	Early-Bird Rate (by 3/7/22)	Standard Rate (after 3/7/22)	communicable disease, lik	wledge the inherent risk of exposure to the Covid-19 and its variants, in any public esent. I agree to release and hold harmless
☐ Member	□ \$795	□ \$845		sportation Association (APTA), the facilities
☐ Non-Member	□ \$2,000	□ \$2,000		epresentatives from and against damages, uses arising from the contraction or spread of
☐ Federal Gov/Univ Faculty	□ \$500	□ \$500		limited to Covid-19 and its variants, due to
□ Spouse/Guest	□ \$125			on in any aspect of this APTA event. Further,
Includes reception only.				te, and local laws, orders, directives, and
No fee Category – Selecting one pre-approval from APTA or addi will have limited access to the co Media -must be approved by A	tional verification onference, include PTA by emailing	on. Please note that you ling no meals. cchitwood@apta.com	for Disease Control and Pr such orders, directives, and of this APTA event includ to hand sanitation, social d not to participate in any as	d-19 and its variants, including the Centers revention guidance. I will comply with all d guidelines while participating in any aspecting, without limitation, requirements related distancing, and use of face coverings. I agree spect of this APTA event if I am experiencing its variants (such as cough, shortness of
□ Speaker -valid only for sessio□ Student -copy of valid studen			breath, or fever), have a co	onfirmed or suspected case of Covid-19 or its contact in the last 14 days with a person who

Payment Summary

Registrations paid by check will NOT be processed without full payment. To pay by credit card, register online at $\underline{www.apta.com}$

☐ 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: Registration fees will be refunded in full at anytime by emailing your cancellation request to meng@apta.com.

has been confirmed to have or suspected of having Covid-19 or its

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.