

## 88th Annual Meeting

NOVEMBER 8-10, 2017
THE RITZ-CARLTON NAPLES | NAPLES, FL

► REGISTRATION FEES			
	ON/BEFORE OCT. 16	AFTER OCT. 16	QTY. FEES
IPAA Member 1st & 2nd Attendee from Same Company	\$795	\$895	\$
Additional IPAA Member 3rd+ Attendee(s) from Same Company	\$695	\$795	\$
Non-Member*	\$1195	\$1295	\$
Emerging Leaders**	\$425	\$525	\$
Spouse/Companion	\$425	\$525	\$
<b>Children</b> (17 & younger) (Includes two receptions and final dinner)	\$150	\$150	\$

## **▶** BANQUET TICKETS

Indicate below which function you and your registered guest(s) plan to attend. Full registration fees cover the cost of the banquet tickets for each banquet event listed. Kindly do not request tickets if you do not plan to attend. If your spouse/companion and/or children plan to attend any food and beverage functions, we ask that you register them first. Children are welcome to attend all meal functions, with the exception of the Membership Luncheon and Roustabout Dinner.

WEDNESDAY, NOVEMBER 8	#TICKETS	
Welcome to Naples Reception		
THURSDAY, NOVEMBER 9		
Reception		
<b>Roustabout Dinner</b> <i>Roustabouts and Registered Spouses/Guests Only.</i> Pre-registration is required as seats are limited.		
FRIDAY, NOVEMBER 10		
Prayer Breakfast		
Membership Luncheon		
Final Dinner		
► SPECIAL EVENT FEES***		
Limited Space Available	# TICKETS	TOTAL COST
THURSDAY, NOVEMBER 9		

- ${}^{\ast}$  First time non-members automatically  $\,$  receive a one year membership to IPAA (\$450 value).
- \*\*\* IPAA Members under 35 (please attach a photo ID with date of birth) to receive the Emerging Leader rate. Includes membership with IPAA.

Golf Outing 8:00am-1:00pm \$295

\*\*\* All cancellations for the Special Event must be received by October 16, 2017. After this date, a refund cannot be issued.

All cancellations and refund requests must be received in writing. If cancellation is received before October 16, 2017, registrant will receive a refund less a \$150 processing fee. We regret that refunds will not be made if cancellation is received after October 16, 2017 or for no-shows.

► REGISTER			
Click Here to SUBMIT FORM - OR-			
■ FAX/EMAIL 202-293-0681  kdaugherty@ipaa.org			
<ul> <li>MAIL IPAA   1201 15th Street, NW Suite 300</li> <li>Washington, DC 20005</li> </ul>			
NAME			
TITLE			
COMPANY			
ADDRESS			
CITY/STATE/ZIP			
PHONE			
EMAIL			
ASSISTANT'S EMAIL			
SPOUSE/COMPANION NAME (if registering for the conference)			
SPOUSE/COMPANION EMAIL			
CHILD'S/CHILDREN'S NAME AND AGE (if registering/attending any events)			
[ ] <b>SPECIAL SERVICES:</b> Please check here if you require special accommodations to fully participate and attach a description of your needs/specific dietary requirements.			
> PAYMENT INFORMATION			
GRAND TOTAL: REGISTRATION AND EVENT FEES \$			
CHECK ENCLOSED \$			
CREDIT CARD			
CDENIT CADD # EVD DATE			

SIGNATURE