PTDA 2024 INDUSTRY SUMMIT REGISTRATION FORM | PAGE 1 OF 2



October 24-26, 2024

The Broadmoor Colorado Springs, CO

PTDA 2024 Industry Summit

One form per delegate.

For more information, a downloadable and writeable PDF form or to register online, visit ptda.org/SummitRegistration.

Delegate Information

All contact information will be published in the final attendee list.

| Full Name | | Informal Name for Badge | |
|--|---------|---|--|
| Title | Company | | |
| Address | City | State/Province ZIP/Postal Code | |
| Country | Phone | Email | |
| LinkedIn Profile Address | | | |
| Special dietary requirements | | | |
| Is this your first PTDA Industry Summit? | Y N | Spouse/Companion Registration Complete this section only if your spouse/companion will be joining you. | |
| Are you a woman in the PT/MC industry? | | | |
| Are you Next Generation (40 years old or younger)? | | | |
| Are you a key decision maker at a family-owned business? | | Spouse/Companion Full Name | |
| Will you be attending the Closing Event on 10/26 (included in your registration fee)? | | Informal Name for Badge | |

Emergency Contact Information

Name

Phone

PTDA complies with the Americans with Disabilities Act. If you have special requirements, please contact PTDA before September 13, 2024, at +1.312.516.2100.

Industry Summit Registraton Fees Delegate Registration

| | By Sept 16 | By Oct 10 | After Oct 10 |
|--|------------|-----------|--------------|
| PTDA Distributor Member | US\$1,220 | US\$1,320 | US\$1,420 |
| PTDA Manufacturer/ Associate Member | US\$1,450 | US\$1,550 | US\$1,650 |
| Non-Member Distributor* | US\$1,720 | US\$1,820 | US\$1,920 |
| Non-Member Manufacturer* | US\$1,950 | US\$2,050 | US\$2,150 |

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*Note: Non-member registration must be approved by PTDA.

Contact us at ptda@ptda.org.

Delegate Registration Fee

You may transfer a registration to another company employee without penalty. Contact us at ptda@ptda.org.

| spouse/companion registration | | | | |
|--|---------|--|--|--|
| Complete this section only if your spouse/companion will be joining you. | | | | |
| Spouse/Companion Full Name | | | | |
| Informal Name for Badge | | | | |
| Special dietary requirements | | | | |
| Spouse/Companion fee reflects PTDA No markup has been added. See sect registration for optional events. | | | | |
| Option 1: All-inclusive registration fee includes Welcome Reception (10/24); Welcome Breakfast, Networking Lunch, Closing Keynote and Closing Event (10/26). Save 10% compared to registering for each event individually. | | | | |
| | US\$645 | | | |
| Option 2: A la carte registration if not registered under Option 1 and spouse/companion will only be attending specific events. | | | | |
| • Welcome Reception (10/24) | US\$226 | | | |
| • Welcome Breakfast (10/25) | US\$88 | | | |
| Networking Lunch & Closing Keynote (10/26) | US\$138 | | | |
| • Closing Event (10/26) | US\$259 | | | |
| Spouse/Companion Subtota | al \$ | | | |



Your Registration Totals

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Return payment and BOTH PAGES of this form to:

Delegate Registration Fee

Optional Event Subtotal

Grand Total Due

PTDA

Spouse/Companion Subtotal

Optional Event Registration

PTDA Foundation Golf Outing

Create a foursome of delegates and/or spouses/companions by selecting Option 1 or register yourself and/or your spouse/companion using Option 2.

Option 1: FOURSOME

US\$2,000___

Please confirm participation with the members of your foursome before completing this portion of the form. If someone in your foursome needs club rental and the cost will not be covered by the foursome sponsor, please be sure the delegate requests club rental on his/her registration form. *Submission deadline for Option 1 is September 13, 2024.*

FOURSOME HOST:

| Player Name & Company | 230 W Monroe, Ste 1410 Chicago, IL 60606-4703 | Fax: +1.312.516.2101 ptda@ptda.org | |
|--|---|--|--|
| Club Rental Left Right | For refund policies, please visit our web | For refund policies, please visit our website, ptda.org/SummitRegistration | |
| PLAYER 2: | Payment Options | | |
| Name & Company Club Rental Left Right | Payment must be included with this form to qualify for the early discounted registration fee and to appear on the early-release registration list. Registrations will not be processed until payment is received. | | |
| PLAYER 3: | Charge my credit card* | /isa 📃 American Express | |
| Name & Company | I will be paying via ACH. Acces | ss ACH information at ptda.org/ACH | |
| Club Rental Left Right | | | |
| PLAYER 4: | Card No. | | |
| Name & Company | Exp. Date | CSC | |
| Club Rental Left Right | Cardholder Name | | |
| Option 2: INDIVIDUAL | | | |
| Delegate Golf Club Rental Left Right Male Fema | Cardholder Address | | |
| | Cardholder Signature | | |
| Spouse/Companion Golf Club Rental Left Right Male Fema | *Credit card payments will be charged your credit card statement in your local For assistance with your registration, p | l currency. | |
| Optional Event Subtotal | \$ | | |

