PRSM Mid-Year Conference
September 9-11, 2015 • Scottsdale, AZ

NON-EXHIBITING VENDOR REGISTRATION FORM

By Fax: 972.231.4081 By Mail/Check: PO Box 226125, Dallas, TX 75222-6125
Registration Customer Service Toll: 602.792.9194 Email: PRSM@socious.com

ATTENDEE INFORMATION

**All fields are required for processing.*

Member ID *(if applicable)* _____ *First Name _____ *Last Name _____ *Designation _____

*Title _____ *Company Name _____

*Address _____ *City _____ *State _____ *Zip _____

*Phone _____ *Email _____

CONFERENCE QUESTIONS

**All questions are required for processing.*

***First PRSM Conference?** ❑ Yes ❑ No

***How did you hear about the Mid-Year Conference?**

❒ Colleague _____ ❒ Direct Mail ❒ Email ❒ Phone

❒ PRSM Website ❒ Social Media: _____ ❒ Other: _____

***Please indicate any special dietary needs or food allergies:**

❒ Yes / Please specify:_____ ❒ No / None

***Help PRSM reduce food waste and unnecessary spending of your membership dollars by indicating what meal functions you plan to attend:**

❒ Continental Breakfast - Thursday, September 10, 7:30 am-9:00 am

❒ Luncheon – Thursday, September 10, 11:30 am-1:00 pm

❒ Welcome Reception – Thursday, September 10, 5:00 pm–6:30 pm

❒ Continental Breakfast - Friday, September 11, 8:00 am-10:00 am

❒ Closing General Session & Luncheon – Friday, September 11, 11:45 am-1:00 pm

*ADA: Pursuant to the Americans with Disabilities Act, I require specific aids for: ❒ Audio ❒ Visual ❒ Mobile ❒ None

REGISTRATION INFORMATION

REGISTRATION INCLUDES:	**FULL CONFERENCE** *includes admission to all meal functions, education sessions, conference materials & Maintenance MarketPlace.*	Company's Annual Sales Volume must be same as company's membership category. If Annual Sales Volume does not match company's membership category, attendee will be charged the registration fee accordingly.	
CATEGORY	**MEMBER**	**NON MEMBER**	**AMOUNT**
Non-Exhibiting Vendor Full Conference **- Company's Annual Sales Volume Less than $500,000**	❑ **$650**	❑ **$1,650**	**$**
Non-Exhibiting Vendor Full Conference **- Company's Annual Sales Volume Greater than $500,000**	❑ **$1,150**	❑ **$1,650**	**$**

HOUSING INFORMATION

Online Housing Cut-off: Thursday, September 3

HOST HOTEL: Westin Kierland Resort - Rate $179/night

❑ ***As credit card is required to guarantee hotel reservations, please use the same credit card listed below.***

Name on Reservation _____ Arrival Date _____ Departure Date _____

Room Type: ❑ Single ❑ Double Name of person(s) sharing room _____ Special requests _____

PAYMENT INFORMATION

❑ ***Check*** - *Payable to PRSM Association and mail to:*
PRSM Association, PO Box 226125, Dallas, TX 75222-6125

Credit Card ❑ AmEx ❑ Discover ❑ MasterCard ❑ VISA

Total Amount Due _____ Date _____

Credit Card # _____

Expiration Date *(10/15 or after)* _____ CVV Code _____

Name as it appears on card _____

Billing Address _____

City _____ State _____ Zip _____

Cardholder's Signature _____
(Registration not valid without signature and payment.)

REGISTRATION & HOUSING POLICIES

- **Payment:** Registrations will not be processed without FULL PAYMENT. Payment must be made by major credit card or check in US dollars only. Please mail check payments to PRSM Association, PO Box 226125, Dallas, TX 75222-6125. Payments by credit card, please send by fax at 972.231.4081.
- **Membership:** Membership dues must be **current** to receive member rate. Receipts and confirmation for any membership processing will be sent after processing is complete.
- **Vendor Member Registration Fee**: Company's Annual Sales Volume must be same as company's membership category. If Annual Sales Volume does not match company's membership category, attendee will be charged the registration fee accordingly.
- **Lost/Stolen Badges:** Lost or stolen badges are subject to a $100 replacement fee which is non-refundable.
- **Registration Cancellations:** All registration cancellations must be received in writing by email to Membership@prsm.com. **Prior to August 14:** Attendee will receive a full refund minus $25 cancellation fee. **After August 14:** No refunds. Substitutions encouraged. For further assistance, you may contact the PRSM Conference Customer Service at 602.792.9194.
- **Housing Payment:** All reservations require credit card guarantee of one night's deposit with the hotel.
- **Housing Changes/Cancellations:** Reservation changes (based on availability) and cancellations can be made through PRSM Conference Housing Customer Service by email at PRSM@connectionshousing.com until **5:00pm (PT), September 3, 2015**. Beginning September 4 and prior to 72 hours of your date of arrival, please contact your hotel directly for changes or cancellations. Reservations canceled within 72 hours of arrival or failure to arrive on scheduled date of arrival is subject to a cancellation fee equal to one night's room rate plus tax. In addition, hotel may charge an early departure fee for checking out earlier than scheduled. To avoid this, please verify your departure date prior to or upon arrival.
- **Substitutions:** All requests for substitutions must be made in writing with a complete registration form by **5:00pm (CT), September 3** and fax to 972.231.4081. Additional fees may be required based on the replacement's membership status. After September 3, REGISTRATION substitutions will be processed onsite.