

ATTENDEE #1 INFORMATION (Please print legibly)

Customer (Member) ID (if applicable) _____

First Name _____ Last Name _____ Designation _____
 Title _____ Company Name _____
 Address _____ City _____ State _____ Zip _____
 Phone _____ Email _____

CONSENT TO USE PHOTOS

Registration and attendance at, or participation in, PRSM conferences and other activities constitutes an agreement by the registrant to PRSM's use and distribution (both now and in the future) of the registrant or attendee's image or voice in photographs, videotapes, electronic reproductions, and audio tapes of such events and activities.

CONFERENCE QUESTIONS (Must complete for processing)

1st PRSM Conference? Yes No

How did you hear about the PRSM2016 National Conference?

Colleague Direct Mail Email Phone PRSM Website Other

Please provide Colleague's name or Other: _____

Special dietary meals or have food allergies?

Yes Pls. specify: _____

Kosher for Passover

No/None

Communication Preference: Contact information as selected below will be published on the attendee list. (Check all that apply)

Direct Mail Email Phone

OPTIONAL EVENT: Retail Quick Connect

A dedicated speed-networking event for Retailers & Suppliers. The perfect place for Suppliers to introduce yourself & your services, create the perfect Retail match, and the schedule follow-up appointments during the National Conference and beyond.

Yes, I am interested. (A PRSM staff will contact you with additional information)

No

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

ATTENDEE #2 INFORMATION (Please print legibly)

Customer (Member) ID (if applicable) _____

First Name _____ Last Name _____ Designation _____
 Title _____ Company Name _____
 Address _____ City _____ State _____ Zip _____
 Phone _____ Email _____

CONSENT TO USE PHOTOS

Registration and attendance at, or participation in, PRSM conferences and other activities constitutes an agreement by the registrant to PRSM's use and distribution (both now and in the future) of the registrant or attendee's image or voice in photographs, videotapes, electronic reproductions, and audio tapes of such events and activities.

CONFERENCE QUESTIONS (Must complete for processing)

1st PRSM Conference? Yes No

How did you hear about the PRSM2016 National Conference?

Colleague Direct Mail Email Phone PRSM Website Other

Please provide Colleague's name or Other: _____

Special dietary meals or have food allergies?

Yes Pls. specify: _____

Kosher for Passover

No/None

Communication Preference: Contact information as selected below will be published on the attendee list. (Check all that apply)

Direct Mail Email Phone

OPTIONAL EVENT: Retail Quick Connect

A dedicated speed-networking event for Retailers & Suppliers. The perfect place for Suppliers to introduce yourself & your services, create the perfect Retail match, and the schedule follow-up appointments during the National Conference and beyond.

Yes, I am interested. (A PRSM staff will contact you with additional information)

No

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

REGISTRATION FEE SCHEDULE

Registration (Cancellation) Cut-off: Friday, April 8, 2016

<p>FULL CONFERENCE registration includes admission to Exhibition, all meal functions (including Welcome Reception, Monday, April 25, Retailer Networking Breakfast, and Awards & Sponsor Recognition Luncheon, Tuesday, April 26, and Closing Event, Wednesday, April 27), education sessions (including General Session, Tuesday, April 26) and conference materials.</p>	<p>ONE DAY – MONDAY, 4/25 & TUESDAY, 4/26 registration includes admission to Exhibition, meal functions, education sessions of that day, and conference materials.</p> <p>*ONE DAY – WEDNESDAY, 4/27 registration includes admission to Exhibition, meal functions (excluding the Closing Event), education sessions of that day and conference materials. Ticket for Closing Event available for purchase</p>	<p>GUEST/SPOUSE Guest/Spouse Registration includes admission to Welcome Reception (Monday, April 25), Opening General Session and Awards and Sponsor Recognition Luncheon (Tuesday, April 26), and Closing Event (Wednesday, April 27).</p> <p>Registration is open to an individual who is not associated with or employed in the retail facilities industry. If an individual is not qualified as a guest/spouse, registration will be subject to cancellation.</p>		<p>GOLF CHALLENGE, GOLF CLUB RENTAL & STREET HOCKEY are not included in registration. Additional fees apply.</p>
REGISTRATION CATEGORY	MEMBER		NON-MEMBER	AMOUNT
	EARLY BIRD THRU 2/29/2016	REGULAR 3/1/2016 ONSITE	REGULAR	
Retailer Full Conference	\$199	\$385	\$550	\$
Retailer One Day – Please select day below: <input type="checkbox"/> Monday, 4/25 <input type="checkbox"/> Tuesday, 4/26 <input type="checkbox"/> *Wednesday, 4/27	\$195	\$195	\$275	\$
ADDITIONAL TICKETS				
Guest/Spouse Registration Name: _____	\$275			\$
Golf Challenge (Sunday, April 24) Player's Name: _____	\$325			\$
Golf Club Rental <input type="checkbox"/> Mens <input type="checkbox"/> Womens <input type="checkbox"/> Left-hand <input type="checkbox"/> Right-hand By selecting to rent clubs, you agree to return the rental clubs and accessories in the same condition in which they were received and to be responsible for any damages or losses incurred while clubs are in my possession.	\$60			\$
Street Hockey (Sunday, April 24) Player's Name: _____	\$75			\$
Closing Event – Retailer One Day (Wednesday, 4/27)	\$125			\$

HOUSING INFORMATION

Housing Cut-off: Monday, April 4, 2016

- Hyatt Long Beach | \$209 night + tax
 The Westin Long Beach | \$209 night + tax
 Renaissance Long Beach Hotel | \$209 night + tax
 Courtyard Long Beach Downtown | \$189 night + tax
 Hilton Long Beach | \$209 night + tax
 As credit card is required to guarantee hotel reservations, I authorize to use the same credit card listed below.

1) Name on Reservation _____ Arrival Date _____ Departure Date _____
 Room Type: King Double/Double Name of person(s) sharing room _____ Special requests _____

2) Name on Reservation _____ Arrival Date _____ Departure Date _____
 Room Type: King Double/Double Name of person(s) sharing room _____ Special requests _____

PAYMENT INFORMATION

Check Payable to: PRSM Association
 Mail to: PO Box 226125, Dallas, TX 75222-6125

Credit Card

AmEx Discover MasterCard VISA

Credit Card # _____

Exp Date **(5/2016 or after)** CVV Amount

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 972.349.7715.
- Membership:** Dues must be **current** for 2016 to receive member rate. Receipts/confirmation will be sent once application is processed.
- Full Conference Registration** includes admission to Exhibition, all meal functions (including Welcome Reception, Monday, April 25, Retailer Networking Breakfast, and Awards & Sponsor Recognition Luncheon, Tuesday, April 26, and Closing Event, Wednesday, April 27), education sessions (including General Session, Tuesday, April 26) and conference materials.
- One Day – Monday, 4/25 or Tuesday, 4/26 registration** includes admission to Exhibition, meal functions, education sessions of that day, and conference materials.
- One Day – Wednesday, 4/27 registration** includes admission to Exhibition, meal functions (excluding the Closing Event), education sessions of that day and conference materials. Ticket for Closing Event available for purchase
- Guest/Spouse Registration** Guest/Spouse Registration includes admission to Welcome Reception (Monday, April 25), Opening General Session and Awards and Sponsor Recognition Luncheon (Tuesday, April 26), and Closing Event (Wednesday, April 27). If an individual is not qualified as a guest/spouse registration will be subject to cancellation.
- Lost/Stolen Badges:** Lost or stolen badges are subject to a \$100 replacement fee which is non-refundable.
- Golf Challenge, Golf Club Rental and Street Hockey** have separate registration fees and are available for purchase for registered full conference attendees.
- Registration Cancellations:** All registration cancellations must be received in writing by email at Membership@prsm.com. **Prior to April 8, 2016:** Cancellations received will receive a full refund minus a \$100 cancellation fee. **After April 8:** No refunds. For further assistance, you may contact the PRSM Membership Department at 972.231.9810.
- Housing Cancellations:** Reservation changes (based on availability) and cancellations can be made through PRSM Conference Registration & Housing Customer Service by email at PRSM@wynndhamjade.com until 5pm (CT), April 4, 2016. Beginning April 15 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 REGISTRATION substitutions must be made in writing with a completed registration form faxed to 972.231.4081 by 5pm CT, April 15, 2016. Additional fees may be required based on the replacement's membership status. After April 15, late REGISTRATION substitutions will be processed onsite.