



ANNUAL CONFERENCE REGISTRATION FORM
March 16 – 17, 2020
Springfield, IL

| | MEMBERS | NON-MEMBERS |
|-----------------------------------|----------------|--------------------|
| FULL REGISTRATION | \$325.00 | \$425.00 |
| EXHIBIT SPACE (OPTIONAL) | \$250.00 | Not Available |
| ADDITIONAL TICKETS: | | |
| CONFERENCE & RECEPTION | \$95.00 | \$125.00 |
| BREAKFAST | \$30.00 | \$40.00 |
| PRESIDENTIAL LUNCHEON | \$50.00 | \$65.00 |
| IAPA UNDER ARMOUR GOLF HAT | \$25.00 | Not Available |

NOTE: Each company must purchase one complete registration (which includes tickets for all events and IAPA logo Under Armor Golf Hat) in order to be eligible to purchase additional tickets to any of the activities.

FULL REGISTRATION

| Name* | Company | Fee \$325/\$425 | Exhibit Space \$250 | | | Total |
|-------|---------|--------------------------|---------------------------|--|--|-------|
| 1. | | <input type="checkbox"/> | <input type="checkbox"/> | | | \$ |

ADDITIONAL TICKETS

| Name* | Company | Conference/ Reception | Breakfast | Lunch | Hat | Total |
|-------|---------|--------------------------|--------------------------|--------------------------|--------------------------|-------|
| | | \$95/\$125 | \$30/\$40 | \$50/\$65 | \$25 | |
| 2. | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | \$ |
| 3. | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | \$ |
| 4. | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | \$ |
| 5. | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | \$ |
| 6. | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | \$ |
| 7. | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | \$ |

* Please list names as you would like them to appear on name badges.

GRAND TOTAL \$

| | |
|------------------|--|
| Ordered By: | |
| Company: | |
| Billing Address: | |
| City, State Zip: | |
| Phone: | |
| E-Mail Address: | |

☐ Bill Me

☐ Payment Enclosed

(Please do not combine this payment with other payments)

All registrations are due by March 16, 2020. After this date, cancellations will not be accepted. Registration package (badge, tickets, and hat, if applicable) will be available at the Registration Desk the day of the meeting. Please return this form to:

Illinois Asphalt Pavement Association
241 N. 5th Street
Springfield, IL 62701
Fax: 217-544-0086

Members will be billed after the meeting. Non-members of IAPA must pay in advance, by including your check with your registration form.