

OPTIONAL EVENT

KICK OFF RECEPTION

When

Wednesday, November 13, 2019 4:30 – 6:30 pm

Where

SkyLounge at the Glenn Hotel 110 Marietta Street NW Atlanta, GA 30303

Fee

\$25

Includes two drink tickets and hors d'oeuvres Separate registration required.

Committee Contact

Andrea L. Kenney Tel: +1 404 846 4018

Email: akenney@cororealty.com

ICSC Contact

Katie O'Hare

Tel: +1 646 728 3504 Email: cohare@icsc.org

Return Completed Form and Payment to

Katie O'Hare

ICSC

Southeast Conference & Deal Making 1251 Avenue of the Americas, 45th Floor New York, NY 10020

Terms, Conditions and Rules

This Registration Form is subject to ICSC Terms, Conditions and Rules for Event Registrants available at www.icsc. com/event-terms-and-conditions, which are hereby incorporated by reference

Name	Title		
Company			
Address			
City	State/Province	Zip/Postal Code	
Telephone	Fax		
Email	Your Membership I.D. #		(2019SE)
REQUIRED FOR NON-U.S. APPLICANTS:			
	Date of Birth	Country of Citizenship	
□ Please check here if any of the above information has recently ch	anged.		
Method of Payment			
Check made payable to ICSC enclosed for \$	☐ MasterCard ☐ Visa ☐ AMEX	☐ Discover \$	_
Name (as it appears on credit card)	Signature		
Credit Card Number (include all digits)	Expiration Date (month/year)		