

Registration Form

How to Register

Fax: +1 732 694 1800 Online: www.icsc.com/2020HI

Mail: ICSC

P.O. Box 419822 Boston, MA 02241-9822

Registration Fee

	Advance	On-Site
Member*	\$235	\$290
Non-Member	\$490	\$605
Public Official Member	\$95	\$125
Student Member**	\$50	N/A

^{*}Must be an ICSC member or affiliate member—visit www.icsc.com/membership or call +1 646 728 3800 to join.

Deadlines

Advance registrations must be received by February 13, 2020.

Cancellations

All cancellations are subject to a \$25 cancellation fee. Refunds will not be given for cancellations received after February 13, 2020.

Accessibility

Anyone desiring an auxiliary aid for this meeting should notify **Julia Tiberio** at +1 646 728 3598 no later than **January 31, 2020**.

Continuing Education Credits

ICSC-Certified professionals earn 1.0 credit (A3) towards CRRP certification renewal.

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.

Please Check One: Member No	n-Member Public Officio	ıl Member Student Me	mber
Name	Title		
Company			
Address			
City	State/Province	Zip/Postal Code	
Telephone	Fax		
Email	Your Membership I.D. #		(2020HI)
REQUIRED FOR NON-U.S. APPLICANTS:	Date of Birth	Country of Citizenship	
☐ Please check here if any of the above in		I.	
Methods of Payment No cash accepted in advance or on site.			
☐ 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	n/vear)	

^{**}On-site student registration is not available—advance registration is required.