



REGISTRATION: SIGN COMPANY ATTENDEES ONLY

ENTER THE NUMBER OF ATTENDEES REGISTERING FROM YOUR COMPANY FOR EACH EVENT

(Children of Registered Attendees Under 12 Are Not Required to Register)

August 5 - 7, 2021 - Downstream Casino and Resort

Company Name: TSSA Member Non-Member

Name: (Primary Contact)

Address:

City: **State:** **Zip:**

Email: **Phone:** **Fax:**

CHECK ALL THAT APPLY FOR EACH ATTENDEE

| List Names of Attendees <small>Please Print Clearly. Please copy form for additional names.</small> | Email | General Registration Events & Tradeshow (x) | Banquet (x) | Educational Seminars <small>Select the seminars you plan to attend (x)</small> | | | | | | | | Golfers Handicap or Avg- Score | Trade show ONLY (x) |
|---|--------------|--|------------------------|--|----------|----------|----------|----------|----------|----------|----------|---|--|
| | | | | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | | |
| 1. | | | | | | | | | | | | | |
| 2. | | | | | | | | | | | | | |
| 3. | | | | | | | | | | | | | |
| 4. | | | | | | | | | | | | | |
| 5. | | | | | | | | | | | | | |
| 6. | | | | | | | | | | | | | |
| 7. | | | | | | | | | | | | | |
| 8. | | | | | | | | | | | | | |
| 9. | | | | | | | | | | | | | |
| 10. | | | | | | | | | | | | | |
| 11. | | | | | | | | | | | | | |
| 12. | | | | | | | | | | | | | |

1. Expo General Registration Includes,

- Thursday Welcome Reception
- Saturday Hot Breakfast
- Enrollment in (6) Educational Seminars
- Saturday Buffet Lunch
- Trade show Admittance
- Celebration Poolside Party

| | | | | |
|--|------------|---|-------------|----|
| Expo General Registration Member: | \$95.00 x | # | attendees = | \$ |
| Non-Member: | \$115.00 x | # | attendees = | \$ |
| HALL OF FAME/SCHOLASHIP AWARDS BANQUET | \$75.00 x | # | attendees = | \$ |
| GOLF TOURNAMENT <i>(limited to the first 120 entries)</i> | \$95.00 x | # | players = | \$ |
| GSG U VEHICLE WRAP HANDS ON SEMINAR #1 | \$99.00 x | # | attendees = | \$ |
| CRANE SAFETY & OSHA REGULATIONS, SEMINAR #2 | \$35.00 x | # | attendees = | \$ |

ENTER TOTAL AMOUNT DUE \$

OR, 2. TRADE SHOW ONLY REGISTRATION (Name badge required for admittance to trade show floor)

First Time Expo Attendee Tradeshow ONLY: FREE x # attendees = **FREE**

Method of Payment Check One **Check** **Visa** **Mastercard** **American Express** **Discover**

Credit Card Account #: **Exp. Date:** **CVC Code:**

Print Billing Address: STREET/PO BOX CITY STATE ZIP
(Where you receive the credit card statement)

Print Name: **Signature: X**
(As it appears on the card)

Please fax, or email or mail registration to Rex Montgomery: Tri-State Sign Association
 Fax 913-273-6882 . exec.director@tristatesign.org . PO Box 852017, Yukon, OK. 73085