

# ISD REGISTRATION FORM

FPDA/ISD JOINT INDUSTRY SUMMIT SEPT. 20-23, 2015 NEW ORLEANS MARRIOTT, NEW ORLEANS, LA

**SUBMIT ONE  
FORM FOR  
EACH COMPANY  
REPRESENTATIVE**

ISD Membership Type: (please select one) ☐ Distributor ☐ Associate

Are you a first-time attendee? ☐ Yes ☐ No Are you an Emerging Leader? (Age 40 or younger) ☐ Yes ☐ No

## REGISTER 4 WAYS



**BY MAIL:** International Sealing Distribution Assoc.  
105 Eastern Ave., Suite 104, Annapolis, MD 21403



**BY FAX:**  
(410) 263-1659



**BY EMAIL:**  
info@isd.org



**ONLINE:**  
www.isd.org

Name \_\_\_\_\_ Badge Name \_\_\_\_\_

Company Name \_\_\_\_\_ Title \_\_\_\_\_

Company Address \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_ Zip/Postal Code \_\_\_\_\_ Country \_\_\_\_\_

Email \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_

Spouse/Companion Name (if attending) \_\_\_\_\_ Badge Name \_\_\_\_\_

Do you plan to attend the Spouse/Companion Tour & Luncheon (free w/ registration) ☐ Yes ☐ No

Emergency Contact Name \_\_\_\_\_ Phone \_\_\_\_\_

REGISTRATION FEES	MEMBER BY 8/5/15	MEMBER AFTER 8/5/15	SPOUSE/ COMPANION**	TOTAL
Distributor Member	\$820	\$920		\$
Associate & Affiliate Member*	\$1720	\$1820		\$
I will participate in the Supplier Showcase and need a table <input type="checkbox"/> Yes <input type="checkbox"/> No				
Additional Associate Member	\$920	\$1020		\$
Spouse/Companion Registration**			\$350	\$
Golf Tournament (Tues. 9/22)	\$195	\$195	\$195	\$
Golf Handicap/Average				
Shoe Rental size: _____	\$10	\$10	\$10	\$
Club Rental <input type="checkbox"/> left <input type="checkbox"/> right	\$65	\$65		\$
Club Rental - Spouse/Companion <input type="checkbox"/> left <input type="checkbox"/> right			\$65	\$
Golf Pairing: I'd like to play with _____				
Spouse/Companion Golf Pairing: I'd like to play with _____				

**Attendee Registration Policies:** Please make a photocopy of this form and submit one copy for each company representative attending the FPDA/ISD Joint Industry Summit. Mail or fax by August 5, 2015 to obtain the early bird registration discount. Register by August 20, 2015 to guarantee listing in the official roster of attendees.

**Cancellation Policies:** In order to obtain a refund for convention registration fees, written notice must be received at the ISD office, by the dates noted below:

By 8/20/15 - full refund  
After 8/20/15 - no refund

Tours (select one)	Cost	Delegate	Spouse	Total
Cajun Critters Swamp Tour	\$65.00	\$	\$	\$
Taste of New Orleans Walking Tour	\$60.00	\$	\$	\$
French Quarter Walking Tour	\$35.00	\$	\$	\$
GRAND TOTAL	\$			

**\* PLEASE NOTE:** The first attendee for each Associate company must register for a table top at the Supplier Showcase program. However, you are not required to exhibit. (Exhibit fee is included in first delegate registration fee)

### \*\* SPOUSE/COMPANION REGISTRATION

Includes WWII Reception, and more Monday and Tuesday.

**SUPPLIER SHOWCASE:** (Open to all Associate and Affiliate Attendees) As an FPDA/ISD Showcase Exhibitor, we hereby contract with FPDA/ISD for an exhibit table as described in the Rules and Regulations. Table top selection will be determined on a first-come/first-serve basis. Space is limited. Please register by August 20, 2015 to ensure your listing in the printed convention directory. **NOTE: Each person working your table MUST BE REGISTERED FOR THE SUMMIT!**

### SUPPLIER SHOWCASE:

Person Responsible for Table \_\_\_\_\_

Email \_\_\_\_\_

Company Name to appear on Table Top signage \_\_\_\_\_

Description for Publication of Displayed Products/Services (limit 100 words) \_\_\_\_\_

Please do not place my booth near (company name) \_\_\_\_\_

Authorized Signature \_\_\_\_\_

**PAYMENT** Total Amount Due: \$ \_\_\_\_\_

☐ Check enclosed (payable to ISD) Please charge my: ☐ Visa ☐ MasterCard ☐ AmEx ☐ Discover

Card # \_\_\_\_\_ Exp. date \_\_\_\_\_ Sec. code \_\_\_\_\_

Cardholder name \_\_\_\_\_ Address \_\_\_\_\_

Cardholder signature \_\_\_\_\_

Billing Address \_\_\_\_\_