

REGISTRATION FORM

27th IECA Annual Canadian Conference

First Name: _____

Last Name: _____

Name For Badge: _____

Company: _____

Title: _____

Address: _____

City: _____

State/Province: _____

Province/Postal Code: _____

Email: _____

Work Phone: _____ Cell Phone: * _____

**for emergency purposes only*

I do not wish to receive electronic communications from third party sponsors of the IECA.

First Time Attendee - First time attending an IECA conference
New member to IECA in 2019

Dietary Needs

Gluten-Free Kosher Vegan Vegetarian
Other food allergies or dietary restrictions _____

Special Assistance

Do you require specific aids or services? If yes, the IECA will contact you to discuss your specific requirements.

Visual Mobile Audio Other _____

Registration Rates

Registration Category	Member	Non-Member
Early Bird (by May 10, 2019)	C\$650.00	C\$1000.00
Regular (May 11, 2019 and after)	C\$700.00	C\$1050.00
Monday Only	C\$300.00	C\$350.00
Tue/Wed Only	C\$500.00	C\$550.00
Dinner Only	C\$200.00	C\$225.00
Guest	C\$250.00	C\$250.00

Guest Name: _____

Additional Activities

IECA Golf Tournament at Fairmont Banff Springs Golf Course (Rental Clubs)	C\$250.00 C\$74.00	L or R
Guided Float Trip on the Bow River	C\$75.00	

Summary of Fees:

C\$ _____ + C\$ _____ = C\$ _____
Registration Rate Additional Activities Grand Total

Method of Payment

Cheque made payable to: IECA

1120 Route 73, Suite 200
Mount Laurel, NJ 08054

Credit Card Visa Mastercard American Express

Name on Card: _____

Card Number: _____

Expiration Date: _____ Security Code: _____

Signature: _____

I acknowledge, by registering for this conference, that I give IECA permission to have photographs taken of me during the conference and used for future marketing purposes.

Liability Waiver

I hereby release and hold harmless the IECA, its Officers & Directors, for any accident, loss or injury resulting from participation in this activity. I am aware of the risks and expectations associated with participation in this event. I certify that I am physically fit and able to partake in this designated activity. I will not hold IECA, its Officers or Directors liable for any loss or damage arising out of or relating to this activity, including loss of or damage to property, personal injury, illness or economic disruption.

I agree to allow IECA to contact me via email communication. Emails will be distributed by info@ieca.net or individual staff members. You may opt-out of future email communication at any time in accordance with the Anti-Spam legislation within Canada.

IECA Refund & Cancellation Policy

Refunds for cancellation will be granted provided IECA is notified in writing by Thursday, May 23, 2019. A cancellation processing fee of C\$50.00 will be assessed. For more information regarding administrative policies, such as disputes and refunds, please contact our offices at 856-380-6854.

IECA takes our data responsibilities very seriously. Your contact information is being collected for the purpose of being able to communicate with you. Other data collected is being used to help customize your meeting experience. By registering for this meeting, you are agreeing under the IECA privacy statement that IECA can use your personal information for the purpose of updating you about this meeting.

Please check box to agree to receive future communications from IECA regarding relevant meetings and programs. Please contact IECA via info@ieca.net if you wish to have your information corrected or deleted.