

REGISTRATION FORM & INVOICE



Annual Conference & Exhibition | June 12, 2019

To register, please complete the form below and FAX to APMA at (416) 620-9730 or register online at www.apma.ca

Register more people from your company and SAVE!!!

APMA/CAMM Members: Register **two full conference** delegates at regular prices and deduct \$150 per person on all subsequent conference registrations from your company. All registrations must occur on the same registration form to qualify. Use the form below and fax to APMA. Not available for online reservations and "Special Exhibitor Rate" registrations.

APMA Full Conference - June 12: includes all activities - presentations, concurrent sessions, meals, breaks, receptions, exhibition, and B2B Meetings opportunity (subject to availability): **(June 11- Check box below.)** For Exhibit staff and "Special Exhibitor Rate" registrations, consult the Exhibitor Manual.

Optional: Registration for APMA Full Conference qualifies you to a 25% Registration discount for apmaTEC's **connectTEC Conference** on **June 11, 2019.**

APMA/CAMM Members	FEE STRUCTURE	Up to May 13, 2019	After May 13, 2019
	Full Conference - June 12	\$695.00 + \$90.35 HST = \$785.35	\$810.00 + \$105.30 HST = \$915.30
Non-Members	FEE STRUCTURE	Up to May 13, 2019	After May 13, 2019
	Full Conference - June 12	\$819.00 + \$106.47 HST = \$925.47	\$1015.00 + \$131.95 HST = \$1146.95
connectTEC Conference	If registering for APMA Conference, SAVE 25%		June 11: \$93.75 + \$12.19 HST = \$105.94

*At door registrations - Add \$20.00 plus \$2.60 HST (\$22.60)

HOTEL RESERVATIONS: Reserve your hotel room quoting **Group Code APM0611** prior to May 26, 2019 to receive a conference rate of \$159.00 per night (plus taxes), subject to availability. Call Caesars Windsor (1-800-991-8888) or book online from www.apma.ca.

Company:	Telephone:	Fax:	June 11 B2B Meetings (for manufacturers only) Complimentary for Full Conference Registrants. Pre-registration required. Please check (✓)
Address:	City/Province:	Postal Code:	
First Name on Badge	Last Name:	Email:	<input type="checkbox"/>
First Name on Badge	Last Name:	Email:	<input type="checkbox"/>
First Name on Badge	Last Name:	Email:	<input type="checkbox"/>
First Name on Badge	Last Name:	Email:	<input type="checkbox"/>
First Name on Badge	Last Name:	Email:	<input type="checkbox"/>

Special Dietary Requirements _____

APMA Full Conference Registrants (June 12) : _____ x _____ each (including HST) = \$ _____

Optional: connectTEC Conference Registrants (June 11): _____ x _____ each (including HST) = \$ _____

HST #122758741 Signature: _____ **TOTAL: \$** _____

Cheque Enclosed (APMA members only) Please bill my VISA/MasterCard/AMEX Date: _____

Card # _____ Expiry Date: _____ / _____

Cardholder's Name: _____ Signature: _____

Remit cheque to APMA, 10 Four Seasons Place, Suite 801, Toronto, Ontario M9B 6H7 Tel: 416-620-4220 Fax: 416-620-9730.

Substitutions allowed up to the day of the Conference. No refunds granted after May 31, 2019.

Please check (✓) the box to be subscribed to APMA's complimentary weekly eNews.

