Registration Form

Company:				
Address:				
City/State/Zip:				
Country:	E-mail:			
Tel:	Fax:			
Area of Interest: Shore Excursions	Purchasing	☐ Marketing ☐ Operations		
☐ Other				
Pre-Pai	d Registration Op	otions		
Delegate(s)		#	Χ	\$ 750.00 =
$Associate\ Member\ Delegate(s)\ [Up\mbox{-}to\mbox{-}date$	#	Χ	\$ 700.00 =	
Exhibitor(s)	#		•	
Standard Hard Wall Booth: 2m x 2m (6.74'	#	Χ	\$ 2,550.00 =	
Destination Pavillion: 4m X 8m (13.12' feet	#	Χ	\$ 22,550.00 =	
Exhibitors ~ Please indicate the name you wish to have displayed for your booth:				
FCCA Golf Classic ~ Charity Tournament		#	Х	\$ 250.00 =
Onsite Registration				
Delegate(s)	•	#	Χ	\$ 900.00 =
	ГΟ	TAL =		
Please PRINT clearly or TYPE the Name(s) & Title(s) of all participants, for their Badge. NAME & TITLE:				
Payment Options:	completed registration re			g).
Name of Cardholder:		Exp. Date:	_	
Billing Address:		•		
Signature:				

Payment & Cancellation Policy:

Cancellations must be in writing, there will be a minimum cancellation fee of \$100. No refunds may be offered after September 30, 2010.

* FCCA, in its sole discretion, determines whether a prospective exhibitor/attendee is eligible to participate in the Event. Detailed terms and conditions are available at www.f-cca.com.