HITEC 2012 Attendee Registration Form

Baltimore Convention Center • Baltimore, Md. USA • June 25 – 28

Please clearly and completely fill out and return BOTH PAGES of this form (with payment in U.S. funds) to: HFTP-HITEC Registration; 11709 Boulder Lane, Suite 110; Austin, TX 78726-1832 USA or fax to +1 (512) 249-1533 or register online at www.hitec.org. Registration and payment must be made before June 21, 2012; after that date, you must register on-site. Only one registrant per form.

1. Registration Information

Name (first, middle, last) _____

Badge Nickname (Please print first name or nickname exactly as it should appear on badge) _____

Job Title _____ Company _____

Designation(s): ☐ CHTP ☐ CHAE ☐ CHA ☐ CCM ☐ CHME ☐ Other _____

Address 1 _____ Address 2 _____

City _____ State/Province _____ Zip/Postal Code _____ Country _____

E-mail Address _____ Phone _____ Fax _____

2. Preferences

Check here if …

☐ You do not want to receive e-mail correspondence from HFTP.
(This includes future information about HITEC.)

☐ You do not want HFTP to release your e-mail address to other allied hospitality industry organizations or associations.

☐ You do not want HFTP to release your e-mail to HITEC exhibitors.

☐ You require special accessibility or accommodations.
(If yes, please attach a detailed description.)

☐ This is your first HITEC.

3. Business Classifications

Please select one:

☐ Association
☐ Casino/Riverboat Casino
☐ Club
☐ Club Management Company
☐ Consulting Firm
☐ Convention Center
☐ CPA Firm
☐ Cruise Line
☐ Educational Institution
☐ Hotel Management Company
No. of Properties:
☐ Under 10 ☐ 10 – 25
☐ 26 – 50 ☐ 50+

☐ Hospital
☐ Hotel
☐ No. of Rooms:
☐ Under 50 ☐ 50 – 150
☐ 150+ ☐ Other _____
☐ Other _____
☐ Restaurant
☐ Resort
☐ Retired
☐ Student
☐ Supplier

Amenities:
☐ Golf Course
☐ Restaurant
☐ Spa

4. Primary Job Function

☐ Corporate
☐ Food & Beverage
☐ Financial
☐ Front Office/ Reservations
☐ General Manager
☐ IT/IS
☐ Operations
☐ Other
☐ Owner/Operator
☐ Purchasing
☐ Sales & Marketing

5. Purchasing Power

Please select one:
During the year, I plan to purchase/influence the purchase of products/services on display at this conference in the amount of approximately:

☐ No purchase planned
☐ Less than 10K
☐ 10K – 50K
☐ 50K – 100K
☐ 100K – 250K
☐ 250K – 500K
☐ 500K +

6. Age Range

☐ 21 and Under
☐ 22 to 34
☐ 35 to 44
☐ 45 to 54
☐ 55 to 64
☐ 65 and Over

Fax completed registration (2 pages) to +1 (512) 249-1533. For more info visit www.hitec.org.
Contact HITEC at (800) 646-4387 or +1 (512) 249-5333 or attendee@hftp.org.

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Name of Registrant: _____ Phone: _____

7. Registration Options

	HFTP Member	Nonmember
Conference and Expo		
☐ **New HFTP Member Full Conference**	$875	N/A
Includes $350 membership fee and Full Conference Registration, giving you a savings of $100. See details at right.		
☐ Full Conference Price includes a Welcome Reception ticket.	$625	$775
☐ Exhibits Only Price includes entrance to the exhibit hall Tuesday – Thursday.	$250	$250
☐ Student Registration A copy of a current student ID must be submitted with this form.	$75	$75
Ticketed Events		
☐ Welcome Reception _____ x	$85	$85
☐ CHTP Review (June 25, 7:30 – 11:30 a.m.)	$99	$199
☐ CHAE Review (June 25, 7:30 – 11:30 a.m.)	$99	$199

Scholarship Donation

☐ HFTP Foundation $_____

Optional donation to HFTP Scholarships and Endowments

*Registrations must be postmarked by May 21 to qualify for the early registration price. All prices are in U.S. Dollars.

SUBTOTAL $_____

New Member Full Conference

JOIN HFTP

This registration includes a Welcome Reception ticket, plus a membership with HFTP, the organization that produces HITEC. A savings of $100!

HFTP is an international association with over 4,200 members around the globe. Take advantage of member benefits including continuing education, networking and professional development resources.

Visit www.hftp.org/join for more information.

*New members must have had no affiliation with HFTP for one year prior to registration.

8. Payment Due

Please fill in subtotal from section 7 in space to the right. **$**

☐ Check made payable to HFTP enclosed in the amount of U.S. $ _____

☐ Charge my: ☐VISA (VS) ☐MasterCard (MC) ☐AmEx (AE)

Credit card statement will show payment to HFTP-HITEC.

Credit Card No. _____ Exp. Date _____

Cardholder's Name on Card _____

Cardholder's Signature _____ Date _____

HFTP and its designated agents are authorized to charge this credit card for the full amount due. Funds over the amount indicated in section 7 will be charged only in the event you under-calculate your registration fee.

Cancellation/Transfer Policy

Transfer of a registration to a colleague is free of charge, but must be requested in writing to HFTP. All cancellations must be received in writing at the HFTP office. An administrative fee of 50 percent of the registration will be charged on all cancellations received by May 21, 2012. No refunds will be issued after this date.

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HFTP USE ONLY

Date Received _____

Check # _____ Amt $ _____

CC Auth # _____ Payer P Co