

2021 VIRTUAL GIS REGISTRATION

FOR OFFICE USE ONLY

Registrant Information

Male Female GCSAA Member # (if applicable) _____

First Name _____ MI _____ Last Name _____

Job Title (**Required.** If student or retired, please indicate here.) _____

Facility/Company Name _____

Company Website (**Required for nonmembers.**) _____

Business Type: Circle the category that best describes your business.

Association	GC Architectural Firm	Distributor
GCSAA Chapter	GC Construction Firm	Manufacturer
Golf Course/Club	Irrigation Company	University/College
Other Golf Facility	Lawn & Landscape	Other School
Maintenance Company	Sports Turf	Other — please state below _____
Management Company	Sod Growers	

Preferred Mailing Address: Home Business

Street Address or PO Box _____

City _____ State _____ Zip _____

Country _____

Preferred Phone Number: Home Business

Phone _____

Email (**Required and must be unique.**) _____

Registration Packages Select only one.

Facility Packages

	Member	Nonmember
2001/2 All-Access Facility - 1st Registrant	<input type="checkbox"/> \$850	<input type="checkbox"/> \$1,050
All-Access Facility - Additional Reg.	<input type="checkbox"/> FREE	<input type="checkbox"/> FREE
<i>Print the name of the 1st registrant below</i>		

2008 Base Facility - 1st Registrant	<input type="checkbox"/> \$500	<input type="checkbox"/> \$700
Base Facility - Additional Reg.	<input type="checkbox"/> FREE	<input type="checkbox"/> FREE
<i>Print the name of the 1st registrant below</i>		

Individual Packages

2001/2 All-Access Individual Package	<input type="checkbox"/> \$600	<input type="checkbox"/> \$750
All-Access Individual Package - One Time Free member benefit (GCSAA will confirm eligibility.)	<input type="checkbox"/> FREE	N/A
2008 Base Individual Package	<input type="checkbox"/> \$350	<input type="checkbox"/> \$500
2009 Trade Show Only Package	<input type="checkbox"/> FREE	<input type="checkbox"/> FREE
2010 Distributor Trade Show Package	<input type="checkbox"/> FREE	<input type="checkbox"/> FREE

FILE #	<input type="text"/>
AMT PD	<input type="text"/>

Voluntary Donation

We ask for your consideration in supporting the efforts of The Institute. Your charitable donation may be tax deductible. Please consult your tax advisor.

\$25 \$100
 \$50 Other \$ _____

Data Policy

GCSAA is dedicated to fully protecting their personal data received from our members and customers. To learn more about our information and data policies, please visit the following web pages:

PRIVACY POLICY: <https://www.gcsaa.org/privacy-statement>

GDPR: <https://www.gcsaa.org/gdpr-and-gcsaa>

Terms and Conditions

Registration constitutes agreement to abide by GCSAA Education and Golf Industry Show Virtual Event's terms and conditions.

Cancellation requests must be in writing and can be mailed to GCSAA Registration, faxed to 785.832.3643, or emailed to mbrhelp@gcsaa.org. Requests must be received by **January 31, 2021** to be eligible for a refund and will incur a \$25 cancellation fee. Cancellation requests received after January 31, 2021, will not be eligible for a refund. GCSAA's contractual obligations to registrants/attendees will be considered complete upon the start of the virtual event.

GCSAA reviews registrations and reserves the right to cancel or reclassify any ineligible attendees. GCSAA will attempt to contact you if further information is needed about your registration. Cancellations done by GCSAA as a part of this review will be refunded in full.

All attendees are expected follow the Golf Industry Show Virtual Event [Code of Conduct](#). For full details visit: <https://www.golfindustryshow.com/attendee-resources/code-of-conduct>.

Suitcasing the Golf Industry Show Virtual Event is strictly prohibited. Suitcasing is defined as any activity designed to solicit or sell products or services to delegates attending a meeting, conference or event without the proper authorization by the organizer or in ways that violate the rules of the event. Any attendee who is observed to be soliciting business in another company's booth, throughout the virtual environment, or in violation of any portion of the [Code of Conduct](#) for GIS is subject to removal without refund and additional penalties.

Payment Information

TOTAL DUE \$ _____

Mail: GCSAA Registration
 1421 Research Park Dr.
 Lawrence KS, 66049

Check (Make Payable to GCSAA. Must be U.S. dollars drawn on U.S. bank.)
 Credit Card (MasterCard, Visa, American Express or Discover Card)

_____ / _____ / _____
 Credit Card Number (Amex will only be 15 digits)

_____ / _____ / _____
 Expiration Date (MM/YYYY) Print Card Holder's Name

_____ / _____ / _____
 Card Holder's Signature