

COMBINED REGISTRATION FORM
GULF INTRACOASTAL CANAL ASSOCIATION 116th ANNUAL SEMINAR
August 4-6, 2021 · Westin Canal Place Hotel, New Orleans, LA

ATTENDEE REGISTRATION REGISTRATION FEE: **\$400** · GOVT EMPLOYEES: **\$200** · STUDENT: **\$50**

Name _____ Company / Agency _____

Address _____ City _____ ST _____ Zip _____

Phone _____ E-mail _____

Convention Events: **Please Print Nametags as follows:** _____

GOLF \$75; HOLE SPONSOR \$100 Wednesday Morning August 4 Handicap _____

Wednesday Night Reception Number Attending _____ (no charge) PLEASE INDICATE ANY SPECIAL DIETARY NEEDS

Thursday Luncheon Number attending _____ (no charge) Attending Thursday Spouses' Event Y / N (no charge)

EXHIBITOR REGISTRATION EXHIBITOR FEE: **\$700** Includes one FREE Convention Registration

Name _____ Company _____

Address _____ City _____ ST _____ Zip _____

Phone _____ E-mail _____

Name of person who will claim free convention registration if other than above _____

Requirements: Skirted table(s) ___ qty. Electricity Easel(s)* ___ qty.

*Exhibitor responsible for any additional charges assessed by hotel for easels and wireless internet

Displays should be set up prior to 3:00 pm Wednesday, Aug 4 and may remain until the close of the meeting, Friday Aug 6 at 12:00 p.m. **Please note** exhibitors are still required to complete a separate convention registration form as an attendee to ensure adequate planning for all convention activities. **EXHIBITOR FORMS MUST BE RECEIVED BY July 25, 2019** to guarantee space availability.

SPONSORSHIP

Name _____ Company _____

Address _____ City _____ ST _____ Zip _____

Phone _____ E-mail _____

Sponsorship level: Platinum \$2500 and up Gold \$1000 and up Silver \$ 750 and up Bronze (up to) \$ 749.00

Please also forward your company logo in vector-based or high-resolution rasterized format, AND a photo, if desired, for inclusion in the sponsor slideshow and printed materials to jstark@gicaonline.com.

PAYMENT INFORMATION Check - DISCOVER - MasterCard - VISA - American Express

Total Due: (Registration / Exhibitor / Sponsorship / Golf) \$ _____

___ Check Enclosed (payable to: Gulf Intracoastal Canal Association)

___ Credit Card: Acct No. _____ Exp. Date _____

Name as it appears on Card _____ Security Code _____

Billing Address : _____

MAIL THIS COMPLETED FORM AND PAYMENT TO: GICA SEMINAR, P.O. Box 321649, Cocoa Beach, FL 32932

Register ONLINE at <https://GICA2021.eventbrite.com> Call 901-490-3312 email: jstark@gicaonline.com