



# FORT WORTH 2017

AIRPORTS COUNCIL INTERNATIONAL - NORTH AMERICA  
ANNUAL CONFERENCE AND EXHIBITION  
SEPTEMBER 17 - 20, 2017

## Complimentary Exhibitor Registration Form 10 X 20 Booth

Please type or print neatly. Provide information as you would like it to appear on your badge. Your registration and payment must be complete by **July 28** to ensure that your name and contact information appear in the pre-registration attendee roster which will be sent to all attendees.

COMPLIMENTARY REGISTRATIONS

### Please register your complimentary registrations below

**1**

FULL NAME MR/MS		NICKNAME FOR BADGE
ORGANIZATION		TITLE
ADDRESS		
CITY	STATE/PROVINCE	ZIP/POSTAL CODE
PHONE	FAX	COUNTRY
E-MAIL		

YES! I am planning to attend the closing night event.     
 YES! I wish to participate in the Airport Tour.     
 I am a first-time attendee  
 I require assistance in order to fully participate in this meeting. Send an email to [meetings@aci-na.org](mailto:meetings@aci-na.org) to describe how we can be of assistance.  
 I require special dietary needs. Send an email to [meetings@aci-na.org](mailto:meetings@aci-na.org) to describe how we can be of assistance.

**2**

FULL NAME MR/MS		NICKNAME FOR BADGE
ORGANIZATION		TITLE
ADDRESS		
CITY	STATE/PROVINCE	ZIP/POSTAL CODE
PHONE	FAX	COUNTRY
E-MAIL		

YES! I am planning to attend the closing night event.     
 YES! I wish to participate in the Airport Tour.     
 I am a first-time attendee  
 I require assistance in order to fully participate in this meeting. Send an email to [meetings@aci-na.org](mailto:meetings@aci-na.org) to describe how we can be of assistance.  
 I require special dietary needs. Send an email to [meetings@aci-na.org](mailto:meetings@aci-na.org) to describe how we can be of assistance.

**3**

FULL NAME MR/MS		NICKNAME FOR BADGE
ORGANIZATION		TITLE
ADDRESS		
CITY	STATE/PROVINCE	ZIP/POSTAL CODE
PHONE	FAX	COUNTRY
E-MAIL		

YES! I am planning to attend the closing night event.     
 YES! I wish to participate in the Airport Tour.     
 I am a first-time attendee  
 I require assistance in order to fully participate in this meeting. Send an email to [meetings@aci-na.org](mailto:meetings@aci-na.org) to describe how we can be of assistance.  
 I require special dietary needs. Send an email to [meetings@aci-na.org](mailto:meetings@aci-na.org) to describe how we can be of assistance.

**4**

FULL NAME MR/MS		NICKNAME FOR BADGE
ORGANIZATION		TITLE
ADDRESS		
CITY	STATE/PROVINCE	ZIP/POSTAL CODE
PHONE	FAX	COUNTRY
E-MAIL		

YES! I am planning to attend the closing night event.     
 YES! I wish to participate in the Airport Tour.     
 I am a first-time attendee  
 I require assistance in order to fully participate in this meeting. Send an email to [meetings@aci-na.org](mailto:meetings@aci-na.org) to describe how we can be of assistance.  
 I require special dietary needs. Send an email to [meetings@aci-na.org](mailto:meetings@aci-na.org) to describe how we can be of assistance.



## FORT WORTH 2017

AIRPORTS COUNCIL INTERNATIONAL - NORTH AMERICA  
ANNUAL CONFERENCE AND EXHIBITION  
SEPTEMBER 17 - 20, 2017

# Complimentary Exhibitor Registration Form 10 X 20 Booth

## REGISTRATION OPTIONS

You can submit this form by:



Email

[meetings@aci-na.org](mailto:meetings@aci-na.org)



Fax

(202) 478-0889



Mail

ACI-NA  
P.O. Box 5007  
Client ID 500022  
Merrifield, VA 22116-5007

### REGISTRATION INFORMATION

#### REGISTRATION

As a 2017 ACI-NA Annual Conference exhibitor, you are entitled to:

- Four (4) full conference registrations per 10'x 20' booth purchased

These complimentary full conference registrations enables you to attend the general sessions, all educational sessions, the exhibition hall, chairman's hand-off reception, and closing event.

#### CONFIRMATION OF REGISTRATION

Confirmation will be sent by e-mail to fully paid conference attendees using the e-mail address(es) provided on the registration form. If you do not receive confirmation within two weeks after sending your registration form, please e-mail [meetings@aci-na.org](mailto:meetings@aci-na.org). Non-receipt of a confirmation before the conference is not justification for seeking a refund.

#### PRE-REGISTRATION

You will be included on the pre-registration roster, if your registration is received by ACI-NA, and paid in full, by 5pm EDT Friday, July 28, 2017. Registrations or payments received after July 28, will be processed with the higher registration fee and will not appear in the pre-registration roster.

#### ON-SITE REGISTRATION

Any changes after July 28 must be made on-site. Registration in Fort Worth opens September 16. All On-Site Registrations must be paid in full at the time of registration. ACI-NA cannot invoice On-Site Registrations.

#### ADDITIONAL REGISTRATIONS

If you need additional booth personnel registrations beyond your allotted amount, please e-mail [meetings@aci-na.org](mailto:meetings@aci-na.org). Exhibitors are eligible for booth personnel registrations at \$345 each prior by July 28<sup>th</sup>, or \$375 thereafter.

#### OPT-OUT

By registering for the conference you are providing permission to receive e-mails, mailings and faxes related to the conference. If you do not wish to receive any further e-mails from ACI-NA, please send an e-mail to [memberservices@aci-na.org](mailto:memberservices@aci-na.org) with the words "OPT-OUT" in the subject line.

*Please note, if you choose to opt out of receiving e-mail from ACI-NA, you will no longer receive ACI-NA e-newsletters, notices of upcoming meetings, sponsorship opportunities, etc. If you prefer to unsubscribe from certain electronic publications rather than opt-out from all e-mail communications, please e-mail your request to [memberservices@aci-na.org](mailto:memberservices@aci-na.org). Please allow up to 10 days to process your request.*

#### PHOTO/VIDEO DISCLAIMER

By registering for and attending any event, you agree that your image may be used at any time, without further notification, for printed materials, web sites, social media and other marketing purposes.