

2009 CTDA MANAGEMENT CONFERENCE

JW MARRIOT STARR PASS RESORT & SPA IN TUCSON, AZ NOVEMBER 5-7

Name _____ Badge Name _____

Spouse's Name _____ Badge Name _____

Company _____ Title _____

Address _____

City _____ State _____ Zip _____ Country _____

Telephone _____ Fax _____

Email _____ Emergency Contact _____

Are you a first-time CTDA conference attendee? Yes ____ No ____

Manufacturer _____ Distributor _____ Other _____

Conference Registration Fees

	Before April 24	After April 24		
Registrant	\$250	\$695	=	\$
Spouse	\$400	\$400	=	\$
		Subtotal Registration Fees	\$	_____

Master Card/Visa/AMEX Information:

Credit Card Number: _____

Security Code: _____ Expiration Date: _____

Signature: _____

Make check payable to: **Ceramic Tile Distributors Association**. Non CTDA members may attend one time at the member rate. Registration fees cover the costs of all meeting materials, programs, receptions and applicable meal functions. Spouse fees cover social functions.

Mail or Fax this completed form and payment to:

CTDA
800 Roosevelt Road
Building C, Suite 312
Glen Ellyn, IL 60137
Phone: (630)545-9415
Fax: (630)790-3095

- Please check here if you have any personal requirements regarding your attendance at this meeting that arise under the Americans with Disabilities Act.
- Please check here if you have any dietary restrictions that CTDA should be aware of regarding your attendance at this meeting.
- Please check here if you will be bringing additional guests (children, relatives, friends)

Deadlines and Cancellations

Cancellations of conference registrations are acceptable upon written notice.

Refunds will be as follows:
letter postmarked on or before October 1 full refund; postmarked October 2 to October 16 - 50% refund; postmarked after October 16 - NO REFUND.

HOTEL CUT OFF DATE:

September 28, 2009

Hotel reservations

To reserve your hotel room call:
1-800-228-9290

Identify yourself with the Ceramic Tile Distributors Association to receive the discounted group room rate.

Please complete the reverse side of this form.

EVENTS

Please mark with an "X" the events you and/or your spouse/guest plan to attend. Optional event fees are located in the far right hand column opposite each event. Please indicate the number attending and the amount enclosed for each optional event. Schedule is subject to change as the event draws near.

PLEASE NOTE: SOME EVENTS OVERLAP IN TIME, YOU MAY ONLY REGISTER FOR ONE. ALL TOURS ARE FOR SPOUSES/GUESTS ONLY.

			Attendee	Spouse/ Guest	\$/Per Tour
Thursday, Nov 5					
3:00pm	-5:30pm	Board of Directors Meeting (Directors Only)	_____		
3:00pm	-6:00pm	Certification Exam (Must Submit Application)	_____		
5:00pm	-6:00pm	New Member Orientation/Mentoring Program	_____	_____	
6:30pm	-8:00pm	Opening Cocktail Reception	_____	_____	
Friday, Nov 6					
7:00am	-8:00am	Breakfast	_____	_____	
8:00am	-8:30am	Hall of Fame Presentation #1	_____	_____	
8:30am	-10:00am	Mark Krawczyk: Credit Management in Trying Times (and in Good Times, Too!)	_____	_____	
10:00am	-10:30am	Networking Break	_____	_____	
10:30am	-Noon	Don Reynolds: Economic Update 2010	_____	_____	
Noon	-1:00pm	Lunch	_____	_____	
1:00pm	-2:00pm	Jeff Risley: Social Networking	_____	_____	
2:00pm	-2:30pm	CTDA Annual Business Meeting	_____	_____	
1:00pm	-5:00pm	Spouse Tour (For Spouse/Guest ONLY): Arizona Sonoran Desert Museum	_____	_____	\$75/per tour
2:30pm	-5:00pm	Jack Daly: The Power of Relationship Selling	_____	_____	
Saturday, Nov 7					
7:00am	-8:30am	Manufacturer Breakfasts	_____	_____	
8:30am	-10:30am	Distributor Forum (Distributors Only)	_____	_____	
10:30am	Noon	Al Bates: Company Performance Report	_____	_____	
Noon	-1:00pm	Lunch	_____	_____	
1:00pm	-3:00pm	Jerry Yudelson: Housing 2010, What's Green About it?	_____	_____	
3:00pm	-5:00pm	Walter Bond: Keynote, No One Can Stop You But You!	_____	_____	
1:00pm	-5:00pm	Spouse Tour (For Spouse/Guest ONLY): Downtown Historic Tour/Old Town Artisans	_____	_____	\$75/per tour
7:00pm	-10:00pm	Reception and President's Dinner	_____	_____	

Subtotal all optional events	SUBTOTAL \$ _____
Subtotal registration fees from reverse side of this page	SUBTOTAL \$ _____
Payment in U.S. funds to Ceramic Tile Distributors Association	GRAND TOTAL \$ _____

For Office Use Only	Amount Rec'd _____	Date Rec'd _____	Enter Date _____
Check Number _____	Conf. Date _____	Copy to Finance Dept. _____	Processed Payment _____

Please complete the reverse side of this form.