



# 2013 Total Solutions Plus Pre-Conference Registration Form

October 26– 29, 2013  
Hyatt Regency Coconut Point Resort & Spa  
Bonita Springs, FL

Name: \_\_\_\_\_ Badge Name: \_\_\_\_\_

Company: \_\_\_\_\_ Title: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Country: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_ Emergency Contact: \_\_\_\_\_

Please mark an 'X' next to the association(s) you are a member of:

NTCA \_\_\_\_\_ CTDA \_\_\_\_\_ TCNA \_\_\_\_\_ TCAA \_\_\_\_\_ None \_\_\_\_\_

### Non-Conference Registration

Non- Conference Attendee: FREE

Subtotal all optional events from reverse of this form: \$ \_\_\_\_\_

Grand Total: \$ \_\_\_\_\_

Method of Payment (circle one): CHECK VISA MC AMEX

Card No. \_\_\_\_\_

Card Exp. \_\_\_\_\_ Sec. Code. \_\_\_\_\_

Signature \_\_\_\_\_

Checks should be made payable to the Ceramic Tile Distributors Association

### Mail or Fax this completed form with payment to:

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

**Deadlines and Cancellations:**  
Registrations should be received at the CTDA office by **September 26, 2013**. Cancellations of conference registrations are acceptable upon written notice by to **September 26, 2013**. Full refunds cannot be guaranteed after **September 26, 2013**.

**HOTEL CUT OFF DATE:**  
**September 26, 2013**

To reserve your hotel room call: (800)633-7313 *\*Identify yourself with Total Solutions Plus to receive the discounted group room rate of \$189/night.*

**Note: Incomplete Registration Forms will NOT be processed. You must completely fill out and return BOTH pages of this form.**

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 list your dietary restrictions \_\_\_\_\_

Please mark with an "X" the events you and/or your companion plan to attend. Optional event fees are located in the far right hand column. Please indicate the number attending and the amount enclosed for each optional event. Schedule is subject to change. For more information on any of the below events go to: [www.ctdahome.org/tsp](http://www.ctdahome.org/tsp). **NOTE: SOME EVENTS OVERLAP IN TIME, YOU MAY ONLY REGISTER FOR ONE. EVENTS THAT INDICATE CTDA, NTCA, TCAA OR TCNA ARE EVENTS ONLY OPEN TO MEMBERS OF THE CORRESPONDING ASSOCIATION.**

Date	Time	Function	Attendee	Companion	Fee
<b>Saturday, Oct 26<sup>th</sup></b>					
	8:00am	-12:00pm	NTCA Methods and Standards Committee Mtg.	_____	
	8:00 am	-11:00am	CTDA CCTS Testing (Exam)	_____	
	8:00am	-12:00pm	CTEF Board of Directors Meeting	_____	
	10:15am	-11:45pm	CTDA Social Media Committee Mtg.	_____	
	10:30am	-2:309m	TCAA Board Mtg.	_____	
	12:00pm	-1:30pm	CTDA Convention Planning Committee Mtg.	_____	
	12:00pm	-1:30pm	CTDA Membership & Benefits Committee Mtg.	_____	
	1:00pm	-5:00pm	NTCA Technical Committee Mtg.	_____	
	1:45pm	-3:15pm	CTDA Education Committee Mtg.	_____	
	1:45pm	-3:15pm	CTDA Marketing/PR Committee Mtg.	_____	
	3:30pm	-5:00pm	CTDA Technical Committee Mtg.	_____	
	3:30pm	-5:00pm	CTDA Certification Committee Mtg.	_____	
	6:00pm	-7:30pm	Board of Directors and Committee Member Reception	_____	
<b>Sunday, Oct 27<sup>th</sup></b>					
	7:30am	-11:00am	NTCA Board Mtg.	_____	
	8:00am	-9:30am	TCAA Contractor Business Mtg.	_____	
	8:00am	-11:00am	CTDA Board Mtg.	_____	
	9:00am	-11:00am	MMSA Meeting	_____	
	9:45am	-11:00am	TCAA IMI Contractor College	_____	
	12:00pm	-6:00pm	Golf Tournament	_____	\$125
	12:00pm	-2:00pm	Segway Tour	_____	\$115
	1:00pm	-5:00pm	Everglades Tour	_____	\$125
	7:00pm	-8:00pm	Opening Reception	_____	