

## BSA Annual Convention Distributor Member Registration Form

Name				Special Rules: It is a policy of BSA that no one shall schedule or conduct any event, function or private meeting
Company				that overlaps with or detracts from BSA programs, meetings
				or social functions other than tours.
				<ul><li>To Register:</li><li>Please complete (1) Member Guest Registration Form</li></ul>
				for each attendee (and spouse) from your company,
				including the attendee's title, complete business address, phone and email.
			Badge	<ul> <li>Please include your spouse's email address if he/she is attending the convention.</li> </ul>
•				<ul> <li>Indicate if you are a first-time BSA Convention</li> </ul>
				<ul><li>attendee.</li><li>Indicate if you are a young executive. *A future industry</li></ul>
			Zip	leader is defined as a professional currently in
				management or executive development positions within their individual companies. These individuals are
·	DICATE EMER			naturally poised for long-term leadership roles within our industry and our association.
_	_			<ul> <li>Check applicable boxes for registration fees and</li> </ul>
				<ul><li>calculate subtotal.</li><li>Indicate if you are bringing children or other guests not</li></ul>
	rst time attende		Yes \( \Bar{\cappa}\) No \( \Bar{\cappa}\)	registered.
•	oung executive		Yes No No	<ul> <li>Mark under the appropriate columns on page 2 the functions that you and your spouse plan to attend. For those functions requiring a separate fee, please indicate the number of people attending and the subtotal</li> </ul>
	on Registrat e the appropriat		ate on line to the right.	<ul> <li>amount enclosed for that function.</li> <li>At the bottom of page 2, add the sub-totals from pages 1 and 2 and indicate the grand total enclosed.</li> </ul>
ONLINE RE	EGISTRATION:	If you register	via our website:	<ul> <li>Mail or fax to the BSA office at: 800 Roosevelt Road, C-312</li> </ul>
	Before	After	Total	Glen Ellyn, IL 60137 <b>Fax: (630)790-3095</b>
Member Spouse	<b>3/2/15</b> \$1,295 \$770	3/2/15 \$1,370 \$770		This year's registration fee includes an additional \$20.00 which will be donated to the Barnabas Center.
FAX OR MA Member	AIL YOUR REG \$1,423	ISTRATION FO \$1,505	DRM INTO BSA OFFICE:	<ul> <li>Please note: If you fax or mail your registration form into the BSA office, an additional 10% administrative fee will be added.</li> <li>Hotel Reservations:</li> </ul>
Spouse Subtotal Re	\$845 gistration Fees	\$845		Please make hotel reservations by <b>April, 1, 2015:</b> The Ritz-Carlton Amelia Island 4750 Amelia Island Parkway, Amelia Island, FL 32034
				Phone: (904)277-1100
☐ Please i	ndicate any per	sonal requireme	ents:	Deadlines & Cancellation
☐ Please i	indicate any diet	ary restrictions.		Registrations should be received at the BSA office by <b>April 1, 2015.</b> Full refunds cannot be guaranteed after <b>April 6, 2015.</b>
☐ I will be	bringing childre	n or other guest	ts	

If you have any questions about your registration, please email <a href="mailto:info@bsahome.org">info@bsahome.org</a> or call (630)858-3838

Please mark with an "X" all events you and/or your spouse plan to attend. Spouses are encouraged to attend all events listed in blue. Fees for optional events are listed in the far right hand column and are priced per person. Please indicate the number attending and the amount enclosed for each optional event.

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T-Shirts: Please choose one of the following sizes for you and your spouse/companion

Attendee Name:

Small	Medium	Large	X-Large	XX-Large						
Friday, May 1	Event Name				Attendee	Spouse	Fee	Total		
2:20 p.m. – 2:50 p.m.	Committee Chai	rmen Briefing								
3:00 p.m. – 4:00 p.m.	Supply Chain Strategy and Technology Committee									
4:10 p.m. – 5:10 p.m.		Ifacturer Relations	Committee							
5:20 p.m. – 6:20 p.m.	Educational Ser	vices Committee								
<b>Saturday, May 2</b> 7:50 a.m. – 8:50 a.m.	Long Pango Co	nyontion Planning	Committee							
9:00 a.m. – 10:00 a.m.	Long Range Convention Planning Committee Past Presidents Council									
10:10 a.m. – 12:10 p.m.	Board of Directors Meeting									
2:00 p.m. – 4:30 p.m.	Opening Beach	Bash								
Sunday, May 3	Doodfast									
7:30 a.m. 7:45 a.m. – 11:30 a.m.	Breakfast Business Session	ne								
6:30 p.m. – 7:00 p.m.	1 <sup>st</sup> Timers Rece									
7:00 p.m. – 10:00 p.m.		es Reception & Dir	ner							
8:00 a.m 9:00 a.m.	Beach Yoga (fo	r Spouses and Coi	mpanions)				\$ 28	=		
10:00 a.m. – 11:30 a.m.		(for Spouses and (					\$ 35	=		
1:00 p.m. – 5:00 p.m.	_		ompanions)							
2:00 p.m. – 3:00 p.m.	Tennis Tournan		one ONE transference				\$ 85	=		
2.00 p.m. – 3.00 p.m.		•	ose ONE treatment	<b>70</b>			\$168	=		
	Warm Himalaya		avenly Escape Massag age Classic F 							
Monday, May 4										
7:00 a.m. – 7:30 a.m.	Continental Brea									
7:30 a.m. – 11:00 a.m.	Business Session		Diaman							
7:00 p.m. – 10:00 p.m.		York Reception &						_		
8:00 a.m 8:45 a.m.			and Companions)				\$ 0			
9:30 a.m. – 11:30 a.m.		or Spouses and Co	ompanions)				\$ 14	=		
12:15 p.m. tee time	Golf Tournamer Men's handicap		s handicap				\$200	=		
	•	Men's Wo	men's				\$ 65	=		
12:15 p.m. – 5:30 p.m.	Fishing Tournar	ment Please choc	se ONE option				\$230	=		
1:00 p.m 4:00 p.m.	Off-Shore Horseback Ridii	_ In-Shore ng on the Beach	-				\$140	=		
Tuesday, May 5										
8:00 a.m. – 11:00 a.m.	Manufacturer Ho	osted Conference	Tables							
7:00 p.m. – 10:00 p.m.	Pool Party Rece									
9:00 a.m. – 1:30 p.m.	Salt Cooking So	hool						=		
12:00 p.m. – 5:00 p.m.	Sailing						\$180	=		
Wednesday, May 6										
9:00 a.m. – 12:00 p.m.	2016 Conventio (committee men	n Committee Meet nbers onlv)	ing							
*Registering for one or mo  By checking this box, y	ore tours requires you accept the terms	our acceptance of to of the Full Liabilit	he terms of BSA's Full y Release. You may vi	Liability Releas ew BSA's Full L	e. iability Releas	se at the follow	ing link:			
https://www.bsaconventior		<u>DX</u>				DAGE 0 0111	DECEN	•		
Subtotal all optional events PAGE 2 SUBTOTAL \$_										
Subtotal registration fees f								\$		
Payment in U.S. funds to	_	_			_	GRANE	IOIAL	\$		
_	] Visa		MasterCard		an Express					
Name on Card								_		
Card Number								_		
Expiration Date			Security Cod	de						
Signature required for cred	dit card							-		