



BSA Annual Convention Trade Press Registration Form

Name _____
 Company _____
 Title _____
 First name or nickname for Name Badge _____
 Attendee Email _____
 Spouse Name (if attending) _____
 Spouse First name or nickname for Name Badge _____
 Spouse Email _____
 Business Address _____
 City _____ State _____ Zip _____
 Phone _____ Fax _____

PLEASE INDICATE EMERGENCY CONTACT:

Name: _____
 Phone: _____

Are you a first time attendee? Yes No

Convention Registration fees:

Please circle the appropriate fee and indicate on line to the right.

	<u>Before</u> <u>3/2/15</u>	<u>After</u> <u>3/2/15</u>	<u>Total</u>
Editorial Trade Press*-----	\$0	\$0	_____
Other Trade Press -----	\$770	\$770	_____
Spouse -----	\$770	\$770	_____
Subtotal Registration Fees			_____

**Please note: One complimentary editorial registration per publication.
 Payment for spouses must accompany registration form.*

Please indicate any personal requirements:

Please indicate any dietary restrictions.

I will be bringing children or other guests

If you have any questions about your registration,
 please email info@bsahome.org or call (630)858-3838

Special Rules: It is a policy of BSA that no one shall schedule or conduct any event, function or private meeting that overlaps with or detracts from BSA programs, meetings or social functions other than tours.

To Register:

- Please complete (1) Trade Press Registration Form for each attendee (and spouse) from your company, including the attendee's title, complete business address, phone and email.
- Please include your spouse's email address if he/she is attending the convention.
- Indicate if you are a first-time BSA Convention attendee.
- Check applicable boxes for registration fees and calculate subtotal.
- Indicate if you are bringing children or other guests not registered.
- 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 amount enclosed for that function.
- At the bottom of page 2, add the sub-totals from pages 1 and 2 and indicate the grand total enclosed.
- Mail or fax to the BSA office at:
 800 Roosevelt Road, C-312
 Glen Ellyn, IL 60137
Fax: (630)790-3095
- ***This year's registration fee includes an additional \$20.00 which will be donated to the Barnabas Center.***
- **Hotel Reservations:**
 Please make hotel reservations by **April 1, 2015:**
 The Ritz-Carlton Amelia Island
 4750 Amelia Island Parkway, Amelia Island, FL 32034
 Phone: (904)277-1100

Deadlines & Cancellations

Registrations should be received at the BSA office by **April 1, 2015**. Full refunds cannot be guaranteed after **April 6, 2015**.

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.

Attendee Name: _____

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

_____ Small _____ Medium _____ Large _____ X-Large _____ XX-Large

	Event Name	Attendee	Spouse	Fee	Total
Friday, May 1					
2:20 p.m. – 2:50 p.m.	Committee Chairmen Briefing	_____			
3:00 p.m. – 4:00 p.m.	Supply Chain Strategy and Technology Committee	_____			
4:10 p.m. – 5:10 p.m.	Distributor/Manufacturer Relations Committee	_____			
5:20 p.m. – 6:20 p.m.	Educational Services Committee	_____			
Saturday, May 2					
7:50 a.m. – 8:50 a.m.	Long Range Convention Planning Committee	_____			
9:00 a.m. – 10:00 a.m.	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					
7:30 a.m.	Breakfast	_____			
7:45 a.m. – 11:30 a.m.	Business Sessions	_____			
6:30 p.m. – 7:00 p.m.	<i>1st Timers Reception</i>	_____	_____		
7:00 p.m. – 10:00 p.m.	<i>Roaring Twenties Reception & Dinner</i>	_____	_____		
8:00 a.m. - 9:00 a.m.	<i>Beach Yoga (for Spouses and Companions)</i>			\$ 28	= _____
10:00 a.m. – 11:30 a.m.	<i>Morning Bunco (for Spouses and Companions)</i>			\$ 35	= _____
1:00 p.m. – 5:00 p.m.	<i>Tennis Tournament</i>	_____	_____	\$ 85	= _____
2:00 p.m. – 3:00 p.m.	<i>Afternoon at the Spa: Please choose ONE treatment</i>	_____	_____	\$168	= _____
	<i>Relaxation Massage _____ Heavenly Escape Massage _____</i>				
	<i>Warm Himalayan Salt Stone Massage _____ Classic Facial _____</i>				
	<i>Citrus Grove Manicure/Pedicure _____</i>				
Monday, May 4					
7:00 a.m. – 7:30 a.m.	Continental Breakfast	_____			
7:30 a.m. – 11:00 a.m.	Business Sessions	_____			
7:00 p.m. – 10:00 p.m.	<i>New York, New York Reception & Dinner</i>	_____	_____		
8:00 a.m. - 8:45 a.m.	<i>Barefoot Beach Walk (for Spouses and Companions)</i>			\$ 0	= _____
9:30 a.m. – 11:30 a.m.	<i>Charity Event (for Spouses and Companions)</i>			\$ 14	= _____
12:15 p.m. tee time	<i>Golf Tournament (18 holes)</i>	_____	_____	\$200	= _____
	<i>Men's handicap _____ Women's handicap _____</i>				
	<i>Club Rental Men's _____ Women's _____</i>			\$ 65	= _____
	<i>Right Hand _____ Left Hand _____</i>				
12:15 p.m. – 5:30 p.m.	<i>Fishing Tournament Please choose ONE option</i>	_____	_____	\$230	= _____
	<i>Off-Shore _____ In-Shore _____</i>				
1:00 p.m. - 4:00 p.m.	<i>Horseback Riding on the Beach</i>	_____	_____	\$140	= _____
Tuesday, May 5					
8:00 a.m. – 11:00 a.m.	Manufacturer Hosted Conference Tables	_____			
7:00 p.m. – 10:00 p.m.	<i>Pool Party Reception & Dinner</i>	_____	_____		
9:00 a.m. – 1:30 p.m.	<i>Salt Cooking School</i>	_____	_____	\$195	= _____
12:00 p.m. – 5:00 p.m.	<i>Sailing</i>	_____	_____	\$180	= _____
Wednesday, May 6					
9:00 a.m. – 12:00 p.m.	2016 Convention Committee Meeting (committee members only)	_____	_____		

*Registering for one or more tours requires your acceptance of the terms of BSA's Full Liability Release.

By checking this box, you accept the terms of the Full Liability Release. You may view BSA's Full Liability Release at the following link:

<https://www.bsaconventions.org/or/Liability.aspx>

Subtotal all optional events PAGE 2 SUBTOTAL \$ _____
 Subtotal registration fees from page 1 PAGE 1 SUBTOTAL \$ _____
Payment in U.S. funds to Bearing Specialists Association GRAND TOTAL \$ _____

Please bill my: Visa MasterCard American Express

Name on Card _____

Card Number _____

Expiration Date _____ Security Code _____

Signature required for credit card _____