

# Building Systems Housing Summit

October 8 - 10 | Hershey, PA | Registration Form

To register in advance, please return the form by 5:00 pm, **Friday, September 22, 2017** to NAHB Office of the Registrar by fax to **202-266-8400** or via e-mail to **registrar@nahb.org**. To register onsite, bring the completed form to the Hershey Lodge beginning 7:00 AM, October 9.

ATTENDEE NAME (This is how your badge will read; please print clearly.)	DESIGNATION(S)	MEMBER/PIN NUMBER
TITLE	COMPANY	SPOUSE/GUEST NAME
ADDRESS		
CITY	STATE	ZIP
PHONE	CELL PHONE	FAX
17SHW		
EMAIL (It is NAHB's policy not to sell or distribute your email address.)	MKT CODE	

## REGISTRATION FEES

### Onsite (September 23 – October 10)

Member	_____	@ \$500 = _____
Non-member	_____	@ \$545 = _____
Additional Sponsor	_____	@ \$200 = _____
SA Walters Past Winners	_____	@ \$250 = _____
Students	_____	@ \$250 = _____
Spouse (Reception only)	_____	@ \$85 = _____
Housing Factory Tour	_____	@ \$50 = _____

### Primary Business Type:

- |   |  |
|---|--|
| <input type="checkbox"/> Systems-built Housing Manufacturer | <input type="checkbox"/> Trade Publication |
| <input type="checkbox"/> Product Manufacturer/Supplier      | <input type="checkbox"/> Builder           |
| <input type="checkbox"/> Industry Consultant                | <input type="checkbox"/> Other: _____      |

Length of time in the building industry or in professional specialty:

- ☐ 2 years or less    ☐ 3 – 5 years    ☐ 6 – 10 years    ☐ More than 10 years

As a result of attending this event, I expect what I will learn will (select the option that best applies):

- ☐ Have a significant impact on the overall performance of my business.  
☐ Give me new ideas to implement that will have some impact on my business.  
☐ Have no impact on my business.

By participating in the networking opportunities at this event, I expect to (select the option that best applies):

- ☐ Make contacts for potential business opportunities.  
☐ Exchange ideas with my peers that will help me in my business.  
☐ Socialize with other attendees.  
☐ Do none of the above; I don't plan to attend the networking events.

Do you primarily access business emails via a handheld device?

- ☐ Yes    ☐ No

## PAYMENT METHOD

Registration must include payment. You may register online using American Express, MasterCard, VISA or electronic check.

Total Enclosed: \_\_\_\_\_ ☐ Check (made payable to NAHB)    ☐ American Express    ☐ Visa    ☐ MasterCard

CARD NUMBER	CSV NUMBER	<input type="checkbox"/> Check here if billing information below is the same as attendee information above		
EXPIRATION DATE	BILLING CONTACT NAME	PHONE	CELL PHONE	
SIGNATURE	BILLING CONTACT FAX	EMAIL		
PRINT NAME (As it appears on card)	BILLING CONTACT ADDRESS	CITY	STATE	ZIP

All cancellation requests must be made in writing. Send them to NAHB Education, Office of the Registrar. Refunds will be given for all requests received by 5:00 p.m. EST on Friday, September 29, 2017, less a \$100 administration fee. Registration fees for cancellations received after September 29, 2017 cannot be refunded. Substitutions are permitted by writing the Office of the Registrar. Contact the Office of the Registrar at 800-368-5242 x8338 or via email at registrar@nahb.org.



If you have special dietary requirements or require any special assistance to fully participate, please call NAHB's Office of the Registrar at 800-368-5242 x8338 or email registrar@nahb.org