

GULF INTRACOASTAL CANAL ASSOCIATION 106th Annual CONVENTION
August 10-12, New Orleans, LA -- REGISTRATION FORM

ATTENDEE REGISTRATION

ATTENDEE REGISTRATION FEE: \$400

Name _____ Company _____
Address _____ City _____ ST _____ Zip _____
Phone _____ E-mail _____

Convention Events:

Please Print Nametags as follows:

Golf – Wednesday Morning Number attending _____ Registrant _____
Wednesday Awards Dinner Number attending _____ Spouse _____ (No Charge)
Thursday Luncheon Number attending _____ *Attending Thursday Spouses' Event* Y / N

EXHIBITOR REGISTRATION

EXHIBITOR FEE: \$700 Includes one FREE Convention Registration

Name _____ Company _____
Address _____ City _____ ST _____ Zip _____
Phone _____ E-mail _____

Name of person who will claim free convention registration if other than above _____

Requirements: Skirted table(s) ___ qty. Electricity Easel(s)* ___ qty.

*Exhibitor responsible for any additional charges assessed by hotel for easels and wireless internet

Displays should be set up prior to 3:00 pm Wednesday, August 10, and may remain until the close of the meeting, Friday August 12 at 12:00 p.m. **Please note** exhibitors are still required to complete a separate convention registration form as an attendee to ensure adequate planning for all convention activities. **EXHIBITOR FORMS MUST BE RECEIVED BY AUGUST 1, 2011** to guarantee space availability.

SPONSORSHIP

Name _____ Company _____
Address _____ City _____ ST _____ Zip _____
Phone _____ E-mail _____

Sponsorship level: Platinum \$2500 and up Gold \$1000 and up Silver \$ 750 and up Bronze (up to) \$ 749.00

SPONSORSHIP FORMS MUST BE RECEIVED BY AUGUST 1, 2011 Please also forward your company logo in vector-based or high-resolution rasterized format, AND a photo, if desired, for inclusion in the sponsor slideshow and printed materials to info@gicaonline.com.

PAYMENT INFORMATION Check - DISCOVER - MasterCard - VISA - American Express

Total Due (Registration / Exhibitor / Sponsorship) \$ _____

___ Check Enclosed

___ Credit Card: Type _____ Acct No. _____ Exp. Date _____ Security Code _____

MAIL THIS COMPLETED FORM AND PAYMENT TO: GICA 2011 CONVENTION, P.O. Box 6846, New Orleans, LA 70174

OR Register ONLINE at www.gica2011.eventbrite.com

Questions: Call Jim Stark 901-490-3312, email: info@gicaonline.com