

2009 BUILDING SYSTEMS COUNCILS SHOWCASE

October 25-28

Marco Island Marriott Resort, Golf Club & Spa, Marco Island, FL

REGISTRATION FORM

Use one form per registrant.

Early Bird Registration ends: October 2, 2009

3 WAYS TO REGISTER

ONLINE:
www.nahb.org/SHOWCASE
FAX:
202-266-8501

MAIL:
The NAHB University of Housing, Office of the Registrar
1201 15th Street, NW
Washington, DC 20005

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
	09SB	
EMAIL (It is NAHB's policy not to sell or distribute your email address.)	MKT CODE	

REGISTRATION FEES

PLEASE NOTE: You must enter your member number above in order to receive the member rate.

Early Bird Registration - Ends October 2

(Account #: 832-3403-4701)

Council Member _____ @ \$535= _____

Non-Council member _____ @ \$610= _____

Onsite Registration

(Account #: 832-3403-4701)

Council Member _____ @ \$610= _____

Non-Council Member _____ @ \$710= _____

Additional Exhibitor _____ @ \$285= _____

*Spouse / Guest _____ @ \$200= _____

**Includes access to Welcome Reception & Gala ONLY.*

Optional Activities

(Account #: 832-3960-4701)

Spouse/Guest event - Monday, October 26

Marco Island Boating & Shelling Tour _____ @ \$63.50= _____

Primary Business Type:

- | | |
|---|--|
| <input type="checkbox"/> Systems-built Housing Manufacturer | <input type="checkbox"/> Industry Consultant |
| <input type="checkbox"/> Product Manufacturer/Supplier | <input type="checkbox"/> Trade Publication |
| | <input type="checkbox"/> Builder |
| | <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 job.
 Give me new ideas to implement that will have some impact on my job.
 Have no impact on my job.

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 job
 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.

CARD NUMBER _____ CSV NUMBER _____

EXPIRATION DATE _____

SIGNATURE _____

PRINT NAME (As It Appears On Card) _____

Total Enclosed: _____

- Check (made payable to NAHB)
 American Express Visa MasterCard

Check here if billing information below is the same as attendee information above

BILLING CONTACT NAME _____ PHONE _____ CELL PHONE _____

BILLING CONTACT FAX _____ EMAIL _____

BILLING CONTACT ADDRESS _____ CITY _____ STATE _____ ZIP _____



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 e-mail registrar@nahb.com.

For more information, call 800-368-5242 x8338 or visit www.nahb.org/SHOWCASE

Cancellation/Refund Policy:

All cancellations must be received in writing no later than 5:00 PM EST, Friday, October 9, 2009. An administrative charge of \$100 will apply to each cancelled registration. No refunds will be issued after this date; substitutions are allowed.