MANAGER REGISTRATION





April 24-26 | Hilton Seattle Airport & Conference Center

17620 International Boulevard Seattle, WA 98188

WSCAI MANAGER MEMBERS

You must be a current WSCAI Manager Member to purchase within this ticket category.

Conference Registration			
☐ WSCAI Member Early-Bird (a)	\$125.00	Qty	
☐ WSCAI Member Regular Reg	\$155.00	Qty	
☐ WSCAI Member Late Registra	ation (available March 24 - April 16)	\$185.00	Qty
NON-MEMBER MANA	GER TICKETS		
Conference Registration (N	on-Member)		
☐ Non-Member Early-Bird (avai	\$170.00	Qty	
☐ Non-Member Regular Regist	\$180.00	Qty	
☐ Non-Member Late Registration	on (available March 24 - April 16)	\$200.00 Qty	
	ONS - Can be purchased by both men		\$
LAC Donation 2025			\$
LAC Donation 2025	TENDEE INFORMATION - Ple	ase fill out for each attend	ee you are registering
LAC Donation 2025 CONFERENCE AT ttendee Name	TENDEE INFORMATION - Ple	ease fill out for each attender Preferred First Name for Badge	ee you are registering
LAC Donation 2025 CONFERENCE AT ttendee Name	TENDEE INFORMATION - Ple	pase fill out for each attender Preferred First Name for Badge Food Allergies	ee you are registering
LAC Donation 2025 CONFERENCE AT attendee Name imail association or Company	TENDEE INFORMATION - Ple	Preferred First Name for Badge Food Allergies Credentials/Designations	ee you are registering
LAC Donation 2025 CONFERENCE AT attendee Name imail association or Company	TENDEE INFORMATION - Ple	Preferred First Name for Badge Food Allergies Credentials/Designations	ee you are registerin
LAC Donation 2025 CONFERENCE AT Attendee Name Email Association or Company Member Non-Member	TENDEE INFORMATION - Ple	Preferred First Name for Badge Food Allergies Credentials/Designations Including Food Allergies	ee you are registering
LAC Donation 2025 CONFERENCE AT Attendee Name Email Association or Company Member Non-Member Attendee Name	TENDEE INFORMATION - PlePhone I Vegetarian / Other Dietary Restrictions	Preferred First Name for Badge Food Allergies Credentials/Designations Including Food Allergies Preferred First Name for Badge Food Allergies Food Allergies	ee you are registering



Please fill out additional attendee information on page two of this form.

	e		Preferred First Name for Badge
Email		Phone	Food Allergies
Association or	Company		Credentials/Designations
☐ Member	☐ Non-Member ☐ Ve	getarian / Other Dietary Re	strictions Including Food Allergies
Attendee Nam	ne		Preferred First Name for Badge
			Food Allergies
Association or	Company		Credentials/Designations
☐ Member	☐ Non-Member ☐ Ve	getarian / Other Dietary Re	strictions Including Food Allergies
Attendee Nam	ne		Preferred First Name for Badge
Email		Phone	Food Allergies
Association or	Company		Credentials/Designations
Email		Phone	Preferred First Name for Badge Food Allergies Credentials/Designations
☐ Member	☐ Non-Member ☐ Ve	getarian / Other Dietary Re	estrictions Including Food Allergies
Attendee Nam	ne		Preferred First Name for Badge
			Food Allergies
	Company		Credentials/Designations
Association or		t	etrictions Including Food Allergies
Association or	☐ Non-Member ☐ Ve	getarian / Other Dietary Re	strictions including 1 ood Attergres

Payment Method: ☐ Check ☐ MC ☐ Visa ☐ AmEx	Amount Enclosed Or To Be Charged To Credit Card: \$	
Card #:		
Name on card (print):	Exp. Date:	_ CVV:
Cardholder Address:		
Cardholder Email:	(Registration confirmatio	on will be sent to email addresses.)

Cardholder Phone: ____

Signature: ___