

NAPP Water Feature Conference & Expo: Growing the Water Feature Industry and Your Business

February 28 - March 2, 2010

Evergreen Marriott Conference Resort • Stone Mountain, Georgia

\$599 - per person Education + Hotel - Includes hotel room for Sunday & Monday night - Meals beginning Sunday night Dinner to Tuesday Lunch and Education sessions

Spouse of Education + Hotel - Spouses do not have to pay extra for hotel but spouses are responsible for their own meals.

\$250- per person Education Only - Includes meals beginning Monday Breakfast to Tuesday Lunch and Education sessions.

\$40- Sunday Night Reception/Dinner - This Fee is only for Education Only & Spouse of Education Only or Education + Hotel attendees that want to attend the Reception/Dinner. Education + Hotel Attendees do not have to pay this fee.

\$15- Trade-Show Walk-Through Only

_____ x \$599 - per person Education + Hotel = \$ _____

Attendee Names: _____

_____ x \$250- per person Education Only = \$ _____

Attendee Names for Education Only: _____

_____ x \$40 - per person for Sunday Night Reception/Dinner - For Education Only Attendees and Spouses (Education+Hotel Attendees do not have to pay this fee)

_____ x \$15 - Trade-Show Walk-Through Only

Company Name: _____

Address: _____

City, State, Zip: _____

Phone: _____ Fax: _____ Email: _____

Check Credit Card - (circle one) VISA / MC -- For Full Payment

Check here to make 3 equal monthly payments (credit card only)

Credit Card #: _____ Exp. Date: _____

Name on Card: _____ 3 Digit Security #: _____

NAPP will make all Hotel arrangements for you. Please fill out the below information and send this form in with your registration form.

Your registration includes a hotel room with check in on Sunday, February 28 and departure on Tuesday, March 2. If you wish to check in on Saturday and/or stay until Wednesday, the fee per night without meals is \$152 per night.

Wednesday, February 3, 2010 - Last day for Hotel Reservations.

Confirmations: Confirmations will be sent from Evergreen Conference Center within 72 hours of processing. This is the only hotel confirmation you will receive.

<input type="checkbox"/> Attendee <input type="checkbox"/> Exhibitor PLEASE INDICATE ONE FOR YOUR COMPANY	
PRIMARY NAME ON RESERVATION (for room #1) Please print. Confirmation will be sent to the primary person of each room. First Name: _____ Last Name: _____ Company: _____ Address: _____ City, State, Zip: _____ Email: _____ Phone: _____	<input type="checkbox"/> King <input type="checkbox"/> Double <input type="checkbox"/> Wheelchair accessible Additional Nights <input type="checkbox"/> Saturday Night - \$152 <input type="checkbox"/> Tuesday Night - \$152 ADDITIONAL PERSON(S) in ROOM # 1 _____ _____ _____
ROOM #2 First/Last Name: _____ <input type="checkbox"/> King <input type="checkbox"/> Double <input type="checkbox"/> Wheelchair accessible Additional Nights <input type="checkbox"/> Saturday Night - \$152 <input type="checkbox"/> Tuesday Night - \$152	ADDITIONAL PERSON(S) in ROOM # 2 _____ _____ _____

Please be sure to return this page with your registration form.

Payment Summary:

Attendee Registration: \$ _____ + Additional Hotel Nights: \$ _____ = GRAND TOTAL: \$ _____

Credit Card #: _____ Exp.: _____

Name on Card: _____ 3 digit security code (back of MC/VISA): _____

Signature: _____