



MCAA 2019 Annual Convention

MARCH 3-7, 2019

PHOENIX, AZ

Attendee Information (please use one form per primary attendee from each company)

Primary Attendee _____	Badge Name _____
Primary's Cell # _____	Primary's E-mail _____
Spouse Name _____	Badge Name _____
Spouse's Cell # _____	Spouse's E-mail _____
Guest/Family _____	Age (if under 18) _____
Guest/Family _____	Age (if under 18) _____
Company _____	Job Title _____
Address _____	
City _____	State _____ Zip _____
Home Address _____	
City _____	State _____ Zip _____
E-mail address to send registration confirmation _____	

Primary Registration Type	Qty	Late After Feb. 1	Additional Registrations & Options	Qty	Late After Feb. 1
Registration Received By:					
Contractor/Member Employee		\$2795	Spouse		\$1025
Manufacturer/Supplier		\$2795	Family/Guest (18 yrs. & over)		\$1025
Local Association Executive		\$2795	Teen (age 13-17) *		\$500
United Association		\$2795	Youth (age 5-12) **		\$300
Sponsored Non-Member		\$2795	Golf Tournament Sunday, March 3 <i>(Sold Out)</i>		Wait-List
<i>Please include the signature of the Local Association Executive</i>			Golf Club Rental		Wait-List
			RH	LH	

Total Amount: \$ _____

** Youth registrants are welcome to attend the General Sessions, Opening Party, Tuesday night Dinner and Concert, and Wednesday night Dessert Party.

* Teen Registrants are welcome to attend the education seminars in addition to the events listed above.

Convention Registration Payment

Credit card payments will be accepted for both your convention registration and your hotel reservation. Checks are also welcome, although **reservations are not processed until MCAA has received payment.** Reservations with faxed copies of checks are not processed. Please print and mail or fax this form to 1(240) 238-2699.

MCAA does not recommend the transfer of credit card information via email. Online registration is also available at www.mcaaconvention.org

AMEX
 MC
 VISA
 Check (made payable to MCAA)

Account Number _____ Expiration _____
 Cardholder Name _____ Billing ZIP Code _____
 Signature _____

MCAA Registration Cancellation & Refund Policy

If it becomes necessary to cancel your participation, please send written notification to MCAA. You will receive a full registration refund if you cancel by **February 1, 2019.** *Substitutions are always welcome.*



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Hotel & Room Selection *(if you require more than one room, please indicate your request at the bottom of the page)*

Please indicate your first, second, and third room preferences and MCAA will make every effort to obtain the accommodations of your choice. MCAA will notify you if your selections cannot be filled. **Please review the Hotel Reservation Information & Payment section below.**

Arrival Date _____ Departure Date _____ # of People in Room _____
 E-mail address for hotel confirmation _____ Marriott Rewards Number _____
 Hilton Honors # _____

♿ Please contact the MCAA Meetings Department at (301) 869-5800 if you require special accommodations to fully participate.

All Rooms Are Sold Out!			
*** Minimum 3 nights stay required for this hotel. ***		I need a Hotel Room	
JW Marriott Phoenix Desert Ridge – WAIT-LIST		Room Type	Bed Type
I'd like to be on the wait-list for a room at the JW Marriott should one become available.		Rate	Preference (1 st , 2 nd , 3 rd)
		Standard Room	Single/Doubles
		Suite	Varies
<p>ALL HOTELS ARE SOLD OUT! If you need a hotel room, please contact eventregistration@mcaa.org for options.</p>			

Hotel Reservation Information & Payment

All room reservations are on a first-come, first served basis. Room reservations received after **February 1, 2019** cannot be guaranteed.

- A deposit in the amount of **three nights'** stay is necessary to reserve your accommodation request.
- Room reservations will not be accepted without a guarantee by credit card or check payable to *the hotel of your choice*.
- The balance of the hotel stay will be due to the hotel upon check out.
- Rates are subject to current local sales and occupancy taxes equaling 12.57%.
- **You will receive your Hotel Confirmation three weeks prior to arrival.**

If the cardholder is not present upon check-in, a credit card authorization form provided by the hotel must be completed.

If you would like to use a check or credit card **other than the card provided for your registration** for your hotel deposit, please indicate below:

Credit Card is same as the card for Registration AMEX MC VISA

Account Number _____ Expiration _____
 Cardholder Name _____ Billing ZIP Code _____
 Signature _____

MCAA does not recommend the transfer of credit card information via email. Online registration is also available at www.mcaaconvention.org

Need an additional Room Reservation(s)?

If yes, indicate preferred hotel and room type: _____ Number of additional rooms needed _____
 Special requirements for the additional room(s)? _____
 Arrival Date _____ Departure Date _____ # of People in Room _____

Please return this form by FAX to 1(240) 238-2699 or by mail to MCAA Meeting Dept., 1385 Piccard Dr., Rockville, MD 20850

- If you have any questions please contact MCAA Meetings Department at (301) 869-5800 or email eventregistration@mcaa.org.
- Our business hours are 9:00 a.m. – 5:00 p.m. Eastern Time, Monday through Friday.