

# CTPMA Meeting Registration Form

## Three Ways to Register:

**Online:** Go to [www.ctpma.net](http://www.ctpma.net) and complete the online registration form.

**Mail:** Mail the completed registration form along with a check or credit card to:  
CTPMA, 1240 Iroquois Avenue, Ste. 106, Naperville, IL 60563

**Fax:** 630/428-7700

Questions? Call the CTPMA at 630/428-3211 or email us at [ghedlandhill@ctpma.net](mailto:ghedlandhill@ctpma.net)

| Registration Category  | Quantity | Before May 2 | After May 2 |
|--|----------|--------------|-------------|
| ___ Marketer Registration  | _____    | \$600.00*    | \$750.00    |
| *Send more, save more. Send one marketer at the full price and receive a discount of \$100 on additional marketer registrations. |          |              |             |
| ___ Discount Marketer Registration   | _____    | \$500.00     | \$675.00    |
| ___ Exhibitor Registration   | _____    | \$575.00     | \$725.00    |
| ___ Spouse/Guest Registration  | _____    | \$375.00     | \$425.00    |
| ___ Child Registration (Ages 6-18)   | _____    | \$175.00     | \$175.00    |
| Children ages 5 and under are FREE   |          |              |             |

\_\_\_\_\_  
Name

\_\_\_\_\_  
Spouse/Guest

\_\_\_\_\_  
Spouse/Guest

\_\_\_\_\_  
Child/Children

\_\_\_\_\_  
Company

\_\_\_\_\_  
Address

\_\_\_\_\_  
City/State/Zip

\_\_\_\_\_  
Phone/Email

**Please note: Marketer and Exhibitor Registration** includes the program, program materials, Monday evening reception, Tuesday breakfast and lunch, Wednesday breakfast and Tuesday evening reception and dinner.

**Spouse/Guest and Child Registration** includes the Monday evening reception, Tuesday breakfast and lunch, Wednesday breakfast and Tuesday evening reception and dinner.

## Golf Tournament Registration - \$240.00 per person and includes cart, greens fees and range balls

*If registering more than 2 golfers, please list additional golfers on a separate sheet of paper. Club rental is available for an additional fee*

## Golfer's Information:

| Name  | Handicap | Club Rental: | Right | Left  |
|-------|----------|--------------|-------|-------|
| _____ | _____    | _____        | _____ | _____ |
| _____ | _____    | _____        | _____ | _____ |

**Method of Payment:** \_\_\_ Check \_\_\_ MasterCard \_\_\_ Visa \_\_\_ American Express

(A 3.5% fee will be added to all credit card payments.)

\_\_\_\_\_  
Credit Card Number

\_\_\_\_\_  
Exp. Date

\_\_\_\_\_  
Security ID

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name as it appears on Card

**Cancellations of your meeting registration must be received by Friday, June 20, 2025. A \$50.00 administrative fee will be applied. Cancellations received after that date will not be refunded.**

**Discounted Hotel Rate Deadline is June 30, 2025!**