



## REGISTRATION FORM

Delegate Name (as you would like it to appear on the name badge)		Title
Company/Firm		
Address		
City	Prov/State	Postal Code
Telephone No	E-Mail Address	
Dietary Restrictions		
Gala Guest Name	Dietary Restrictions	

REGISTRATION CATEGORY			AMOUNT
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Please indicate which events you would to attend by filling in the amounts from the appropriate registration category.

<b>ICD.D &amp; DEP ALUMNI RATES</b>			
ICD.D Luncheon – Individual Ticket	\$125	\$125	\$ _____
Conference – Individual Ticket	\$890	\$1,090	\$ _____
Gala – Individual Ticket	\$370	\$490	\$ _____
<b>ICD MEMBER RATES</b>			
Conference – Individual Ticket	\$995	\$1,195	\$ _____
Conference – Group Rate (10 tickets)	\$7,960	\$9,560	\$ _____
Gala – Individual Ticket	\$375	\$495	\$ _____
Gala – Purchased Table (10 seats)*	\$4,500	\$5,940	\$ _____
<b>ICD NON-MEMBER RATES</b>			
Conference – Individual Ticket**	\$1,397	\$1,597	\$ _____
Conference – Group Rate (10 tickets)	\$11,176	\$12,776	\$ _____
Gala – Individual Ticket	\$397	\$557	\$ _____
Gala – Purchased Table (10 seats)	\$4,764	\$6,684	\$ _____
			<b>SUB-TOTAL</b> \$ _____
			<b>ADD 13% HST</b> \$ _____
			<b>TOTAL AMOUNT DUE</b> \$ _____

\*Reserved seating and branded table signage

\*\*Individual Conference rates for non-members include a one-year membership (value \$395)

## PAYMENT OPTIONS

VISA     MasterCard     Payment Enclosed (Please make cheque payable to the Institute of Corporate Directors, 2701-250 Yonge Street, Toronto, ON M5B 2L7)

Cardholder's Name		
Card Number	Expiry Date	Signature

## REFUND & CANCELLATION POLICY

Cancellations must be received in writing by **Wednesday, May 22, 2019**. Cancellations received by this date will be eligible for a full refund.

To register, please send the completed form & payment to [conference@icd.ca](mailto:conference@icd.ca) or by mail to **Institute of Corporate Directors**, 2701-250 Yonge Street, Toronto, ON M5B 2L7

FOR MORE INFORMATION, VISIT [icd.ca/conference](http://icd.ca/conference)