



**TAXICAB, LIMOUSINE &
PARATRANSIT ASSOCIATION**



BLANK AREA FOR OFFICE USE ONLY

PART I: COMPANY INFORMATION

Company _____ Tel (_____) _____
 Address _____ Fax (_____) _____
 City/State/Zip/Country _____

"As a condition of my attendance at the TLPA Mid-Year International Leadership Conference, July 18-20, 2012 in Niagara Falls, CANADA, I irrevocably grant TLPA the right to publish or otherwise use my image, likeness, voice, name, address, and/or phone number."

ADA Requirements: Please indicate if, under the Americans with Disabilities Act, you require the following aid or service: Audio Visual Mobile and please notify the TLPA by **June 1, 2012**.

PART II: ATTENDEE INFORMATION

The Cruise is available to the FIRST 100 conference registrants.

Attendee Name Provide the first and last name of each registrant and TYPE or PRINT the name CLEARLY as it should appear on the name badge. Include each registrant e-mail for registration and confirmation purposes. To register additional registrants, please photocopy this form.	Off-Site Events Please check the box below if you want to attend: First 100 people registered	Conference Registration Fee Refer to the Conference Fee Structure below.	TOTAL
Name _____ E-mail _____	<input type="checkbox"/> Taxi Company & Boat Cruise	\$ _____	\$ _____
Spouse Name _____ E-mail _____	<input type="checkbox"/> Taxi Company & Boat Cruise	\$ _____	\$ _____
Name _____ E-mail _____	<input type="checkbox"/> Taxi Company & Boat Cruise	\$ _____	\$ _____
Name _____ E-mail _____	<input type="checkbox"/> Taxi Company & Boat Cruise	\$ _____	\$ _____
CONFERENCE FEE STRUCTURE		Early Bird Rate Received By May 31	Rate After May 31
TLPA Member: Operator or Public Sector or Spouse or Vendor		\$305	\$345
Non-Member: Operator or Public Sector or Spouse or Vendor		\$405	\$445
Child (ages 6-20)		\$250	\$275
			GRAND TOTAL

PART III: PAYMENT INFORMATION

Checks: Please make checks payable to the **Taxicab, Limousine & Paratransit Association**. All fees must be paid in U.S. currency and drawn on a U.S. bank.

Credit Card: American Express MasterCard Visa

Name on Card _____ Card # _____ Exp. Date _____ Security Code _____
 Authorized Amt. Charged \$ _____ Authorized Signature _____ Billing Street # and Zip Code _____

CANCELLATION & SUBSTITUTION POLICY: 100% refund less a **\$55 processing fee** for a cancellation or for a documented medical emergency that is made in writing and received by the TLPA by **May 31, 2012**. 100% refund less a **\$95 processing fee** for a cancellation that is received between **June 1 and July 1, 2012**. No refunds will be made for cancellation, other than a documented medical emergency, that is received after **July 1**. Substitute attendee(s) from the same company are welcome.

PART IV: HOTEL INFORMATION

The host hotel for the 2012 Mid-Year International Leadership Conference is the **Hilton Hotel & Suites Niagara Falls/Fallsview in Niagara Falls, ON Canada**. The hotel has reserved a limited number of rooms for the group until **June 29, 2012**, or until the block sells out. A special group rate is being offered for City View rooms at \$159 Sunday - Thursday, \$179 on Friday, and \$229 on Saturday. A special group rate is also being offered for two-bedroom suites with views of the U.S. Falls at \$229 Sunday - Friday, and \$279 on Saturday. Tax of 13% HST and 3% TIF will be charged on above room rates.

To reserve a room online, you can visit our TLPA 2012 Mid-Year International Leadership Conference web page and navigate to **Personal Online Group Reservations**, or call Group Reservations directly at 866-873-9829.

This is my # _____ TLPA Mid-Year International Leadership Conference or check here if you are a first time attendee.

Return this form with payment for the conference to:

Taxicab, Limousine & Paratransit Association
 3200 Tower Oaks Blvd., Suite 220,
 Rockville, MD 20852
 P: 301-984-5700
 F: 301-984-5703
 E: info@tlpa.org
 W: www.tlpa.org