



Attendee Registration Form

to register, complete this form and fax it to +1 605-271-8498 or email to brita.price@atmia.com

1) Attendee Information

Name _____ Job Title _____

Company _____

Address _____

City _____ State _____ Postal Code _____ Country _____

Telephone _____ Email _____

2. Email Options & Privacy Settings (mandatory)

ATMIA respects your privacy and will never share your information without your consent. Use the options below to allow us to share your information with other attendees.

- Yes No **Distribute my contact information:** Include my name, title, company in the list of attendees provided at the end of the conference. *Once your registration is complete you will only receive emails relevant to your registration. Please use the options below to select any additional emails you would like to receive.*
- Yes No **Send me email:** Allow conference sponsors & exhibitors to send me email prior to the event sharing information about their company and booth at the event. (Emails are limited to 1 per company)
- Yes No **Send me email about upcoming conferences:** Select the region(s) that you would like to receive upcoming event announcements for. Preferences can be changed at any time. Africa/India/Middle East Asia/Asia Pacific Canada Europe US/Latin America

3) Select your Company Type (required):

- | | | | | |
|---|---|--|---|-------------------------------------|
| <input type="checkbox"/> Financial Institution (other) | <input type="checkbox"/> Card Association | <input type="checkbox"/> ATM Hardware | <input type="checkbox"/> Other Services | <input type="checkbox"/> Legal |
| <input type="checkbox"/> Bank | <input type="checkbox"/> Card Issuer | <input type="checkbox"/> ATM Software | <input type="checkbox"/> ATM Insurance | <input type="checkbox"/> Consultant |
| <input type="checkbox"/> Credit Union | <input type="checkbox"/> Cash Management/Distribution | <input type="checkbox"/> Kiosks & Self-Service | <input type="checkbox"/> Payment Services | <input type="checkbox"/> Media |
| <input type="checkbox"/> Cash Management | <input type="checkbox"/> Network Processor | <input type="checkbox"/> Mobile Technology | <input type="checkbox"/> Security Solutions | |
| <input type="checkbox"/> Independent ATM Deployers (IAD) | <input type="checkbox"/> Switch | <input type="checkbox"/> Service/Maintain/Refurb or Replacing ATMs | | |
| <input type="checkbox"/> Sponsoring Financial Institution | <input type="checkbox"/> Telecommunications | <input type="checkbox"/> Other _____ | | |

4) Registration Options (Please select your registration option below)

Option	Before Oct 31	Before Jan 10	After Jan 10	On Site
New Attendee Special: Includes Workshops, opening reception on Feb 19, sessions/meals on February 20-21, exhibit hall pass, & conference materials. In order to qualify as a new attendee, you must not have attended the event for the last 3 years (i.e. 2016, 2017 or 2018)				
<input type="checkbox"/> New Attendee Special:	\$500	\$500	\$550	\$600
Conference: Includes pre-conference workshops, opening reception on Feb 19, sessions/meals on Feb 20-21, exhibit hall pass, & conference materials.				
<input type="checkbox"/> ATMIA Members #1*	\$500	\$595	\$695	\$750
<input type="checkbox"/> ATMIA Members #2*	\$450	\$545	\$645	\$700
<input type="checkbox"/> ATMIA Members #3*	\$450	\$495	\$595	\$650
<input type="checkbox"/> Non-Members	\$1,300	\$1,395	\$1,495	\$1,595
<i>*In order to receive the discount the attendees must be from the same company, with the same address and registering at the same time with the same form of payment. Cancellation policy, the amount refunded will be the lowest of the registration fees of the group. Cancellation fees may also apply.</i>				
Exhibit Hall Only Includes entrance into the exhibit hall on February 19-21				
<input type="checkbox"/> ATMIA Member:	\$225	\$250	\$275	\$300
<input type="checkbox"/> Non-Members	\$300	\$325	\$350	\$375

5) Payment Information

Credit Card: American Express Visa Discover MasterCard Diners

Total Amount Due: _____ Name on Card: _____

Card Number: _____ Expiration Date: _____ CID #: _____

Delegate Information

* **Member Discounts:** ATMIA members receive discounts when attending this event. To receive the discount, make sure the registering company name is the same as on the ATMIA member database, your membership fees must be current at the time of registration and the event. * **Membership Questions:** If you have questions about your membership, please contact [Amber Howell](#). * **Payment:** Full payment must be received prior to event to be considered pre-registered and allowed into the conference. * **Event policies:** By registering for an ATMIA conference, you are agreeing to all of our [event policies](#). * **Conference Questions:** Contact [Brita Price](#) with any questions.