



REGISTRATION FORM

October 27, 2017

11:00 AM – 1:00 PM

Four Seasons Hotel, 98 San
Jacinto Boulevard, Austin, Texas
78701-4039

Name: _____

Business/Organization: _____

Address: _____

City / State / Zip: _____

Telephone: _____

E-Mail: _____

PAYMENT INFORMATION:

Table Sponsor – Seats Ten (10): \$1,500.00 Includes logo in the program and recognition.

Individual Ticket: \$60.00

Number of Tickets: _____ Preferred Nominee Table, if Possible: _____

Total: \$ _____ Check: _____ Cash: _____ Credit Card: _____ Purchase Order: _____

CREDIT CARD: Visa _____ MasterCard _____ AMEX _____

Expiration Date: _____ Security Code: _____

Credit Card Number: _____

Mailing Address and Zip Code: _____

Credit card payments will not be accepted without proper billing mailing address and zip code for the credit card.

Signature: _____ Date: _____

Complete the form and e-mail to panton@tamacc.org or mail to TAMACC, 606 Main Street, Buda, Texas 78610. Telephone the TAMACC office if you have any questions at (512) 444-5727. Please do not include credit card information in an e-mail, instead indicate when we may telephone you for the number.

Cancellations made before October 10, 2017 will be charged 15% of the registration fee. No refunds will be given for cancellations received after October 10, 2017. All cancellations must be made in writing and postmarked or e-mailed no later than October 10, 2017 at 5:00 PM Central Standard Time. This registration will not be binding against TAMACC in the event of any strike, lockout, injunction, act of war, act of God, emergency declared by any government agency or any other circumstances beyond the control of TAMACC. TAMACC is not responsible for replacing lost or stolen tickets, injuries, or loss of personal property. Registration forms without payment or a purchase order will not be accepted. Reasonable arrangements for persons with disabilities or food allergies will be made, if requested in writing, by October 15, 2017.