LOWER LEVEL SUITEREQUEST & REGISTRATION FORM

WSWA 76[™] ANNUAL CONVENTION & EXPOSITION

March 31 - April 3, 2019 Grande Lakes Orlando



This form is INTERACTIVE. You can type directly onto this form, RENAME IT WITH YOUR LAST NAME, save it and email it as an attachment to <u>registrations@wswa.org</u>. If returning by mail, please type, print clearly or attach a business card.

Please complete all sections of this form and return no later than February 1, 2019. Lower Level suites sell quickly, we encourage interested companies to reserve their suite early.

- Use this form to register attendees if your company is reserving a Lower Level Suite. This form may be used by Associate Members or Non-Members. An Associate Member is defined as a supplier that has paid 2019 Associate Membership dues.
 - The purchase of your Lower Level Suite includes 2 complimentary attendee registrations. Please fill out Step 7 for these badges.
- All company personnel working in the Lower Level suite - must be registered and have a badge.
 - If you are sub-leasing your Lower Level Suite to brand partners or other suppliers you must inform those suppliers of the need to be registered and to have a badge. You must also disclose that information to WSWA
- **3.** Please be certain to indicate the name of the "parent" company that has reserved the Lower Level Suite, as well as the brand (*if applicable*) to be listed.
- **4.** If you are registering at the Associate Member rate, please be sure to indicate the name of the "parent" company (*if applicable*) under which the WSWA Associate Membership is listed.

- There is a 3-Day minimum reservation for all Lower Level Suites, one of which must be Wednesday, April 3.
 - The 3-Day minimum reservation includes 4 hours of set-up on the same day the show opens (Monday, April 1). Note: 4 hours of set-up is not recommended for exhibitors who have room decor, and/or more than a few cases of alcohol beverage samples.
 - The 4-Day reservation includes one full day of set-up the day prior to show opening (Sunday, March 31)
 - Additional days for set-up are available upon request.
- 6. The Terms & Conditions set forth in this form apply to all registered Lower Level Suite personnel and must be signed and dated (see STEP 6 on page 3).
- 7. This agreement is not valid until the registering company receives a confirmation of suite assignment from WSWA, the suite fee has been paid and the, and the Suite Terms & Agreement has been signed and returned.
- **8.** Payment must be made within 2 weeks of receipt of invoice.

INCOMPLETE REGISTRATION FORMS CANNOT BE PROCESSED.

RETURN THIS COMPLETED FORM WITH PAYMENT:

By mail to:

WSWA Meetings & Conventions Department 805 15th Street, NW, Suite 1120 Washington, DC 20005

By email to:

registrations@wswa.org

Online Registration available at:

www.wswaconvention.org

STEP 1: LOWER LEVEL SUITE CONTACTS & INFORMATION

*If the contact information is the same	for any of these categories, please check the	box provided under each header.
COMPANY NAME		OFFICE TELEPHONE
OFFICE MAILING ADDRESS	CITY / STATE / ZIP / COUNTRY	
MAIN POINT OF CONTACT		
	printed materials as the main contact for the	Lower Level Suite.
FIRST NAME	LAST NAME	JOB TITLE
COMPANY	PHONE	EMAIL
PLANNING CONTACT		
☐ Check here if this person is the same as	the main contact	
FIRST NAME	LAST NAME	JOB TITLE
COMPANY	PHONE	EMAIL
ON-SITE CONTACT		
Please list the person we can contact, i		
Check here if this person is the same at the	☐ Main Contact or ☐ Planning Contact	
FIRST NAME	LAST NAME	JOB TITLE
COMPANY	CELLPHONE	EMAIL

Suite Holder Company Name:	
STEP 2: SUITE SELECTION	
Please enter your requested Lower Level Suite name below. Refer to the PDF or online pricing gric Registrant(s) must also complete the registration portion of this form to register for the Conventio Orlando. Lower Level Suite payments can be paid by check or credit card. If paying by credit car See next page for registration instructions for company representatives.	on and to reserve a sleeping room at Grande Lakes
FIRST CHOICE LOWER LEVEL SUITE	☐ 3-Day Package OR ☐ 4-Day Package
SECOND CHOICE LOWER LEVEL SUITE	☐ 3-Day Package OR ☐ 4-Day Package
THIRD CHOICE LOWER LEVEL SUITE	☐ 3-Day Package OR ☐ 4-Day Package
THIRD CHOICE LOWER LEVEL SUITE	
STEP 3: LOWER LEVEL SUITE DATES	
Note: See Schedule of Events for date options.	
Must open suite at 12:00 pm Monday, April 1, 2019. Suites may ONLY be broken down on V	Vednesday, April 3, 2019 AFTER 4:30 pm.
MOVE IN: Saturday, March 30 (early move-in; additional fees apply)	
☐ Sunday, March 31 (4-Day package move-in)	
☐ Monday, April 1 (3-Day package; limited setup time; suite must be open by	12:00 pm)
Approximate Move-in Time:	

STEP 4: LOWER LEVEL SUITE BENEFITS

LOWER LEVEL SUITES: Expand your Exposure by Expanding your Space

CONFIRMED SPACE

Once your space has been requested, assigned, and paid for, WSWA will provide written confirmation of the room name and location so that you may promote your suite in advance of the Convention. This benefit is ONLY available with Lower Level Suites.

VISIBILITY

Lower Level Suites can be located in high or low visibility areas depending upon your preference. Suites can be "open" to all registrants or closed for "by appointment only". You create the vision and we'll work with you to execute it.

EASY MOVE-IN / MOVE-OUT

8:00 am move-in and 5:00 pm move-out (no hotel room check-in or check-out pressure). As soon as you arrive you are able to pick up your Lower Level Suite keys. Early arrival and late departure means fewer rental days than with a Traditional Suite.

NO ELEVATORS

Less Wait Time and More CONVENIENCE for your Customers! Lower Level Suites make it easier and more convenient for your customers to find you!

FULLY CUSTOMIZABLE

Lower Level Suites are fully customizable - no furniture or bed removal fees. In a Lower Level Suite you are able to design the look and feel that best suits your company's needs.

RAPID RESPONSE

Lower Level Suites means quicker delivery of your alcohol beverage product and a rapid response to last minute requests from catering for refreshes, glassware, ice, food and beverage etc.

BASIC HOTEL EQUIPMENT

A \$250 food & beverage minium will be required for basic set ups such as tables and chairs. Should you wish to enhance your look with more upscale furnishings and/or décor, your company can work with outside vendors to create your vision. WSWA will provide a list of preferred providers for your convenience.

VARIETY

Lower Level Suites offer a variety of space options. See floor plans and capacity & dimensions charts for more details.

STEP 5: FEE CALCULATOR	R & PAYMENT METHOD	(Enclose payment with this for	rm)
ALL COMPANY EMPLOYEES AND/OR R STEPS 7-9 TO ENTER REGISTRATION II	EPRESENTATIVES WORKING IN TH	LOWER LEVEL SUITE ARE REQU	
Additional Lower Level Su	uite Personnel REGISTRATIO	N FEES ARE PER PERSON	
(Please Indicate Fee)			
REGISTRANT TYPES	Early Bird Registration Rec'd by December 21	Registration Rec'd between Dec 22 - Feb 1	Registration Rec'd after February 1
WSWA Associate Member* Staying On	-Site	\$525	\$550
Non-Member Staying On-Site	\$575	\$625	\$675
Model Pass	\$275	\$275	\$275
TOTAL # OF REGISTRANTS:			
AMOUNT ENCLOSED (registrants only - c	do not include suite fee):		
* WSWA Associate Members must pay NOTE: Attendees staying at a hotel ot	•		tion fee.
NOTE: 2019 Associate Members are Attendees staying at a hotel	entitled to a \$200 Lower Level Pac other than an official WSWA hotel	ŭ	egistration fee
SELECTED LOWER LEVEL SUITE			
ITEM PACKA	AGE/QTY FEE (per Item)	TOTAL	
Personnel Included w/ Suite	2 \$0		
		<u>\$0</u>	
		\$0 	
Off-Site Registration Fee	\$225	\$0 	
	\$225	\$0 	
Off-Site Registration Fee Models	\$225 \$-	\$0	
Off-Site Registration Fee Models TOTAL AMOUNT: PLEASE INDICATE PAYMENT METHOD	\$	FOREIGN REGIS	
Off-Site Registration Fee Models TOTAL AMOUNT: PLEASE INDICATE PAYMENT METHOD: Dayment must be received in full within two weel	\$	FOREIGN REGIS AND BANK TRA	NSFERS:
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Off-Site Registration Fee Models TOTAL AMOUNT: PLEASE INDICATE PAYMENT METHOD ayment must be received in full within two weel lote that a 3% processing fee will be added to a WILL PAY BY WIRE TRANSFER A CHECK IN THE AMOUNT OF \$ WSWA IS AUTHORIZED TO CHARGE \$	\$	FOREIGN REGIS AND BANK TRA Send bank transfer Bank 10444	NSFERS: rs to: of America O Main Street ax, VA 22030
Off-Site Registration Fee Models TOTAL AMOUNT: PLEASE INDICATE PAYMENT METHOD layment must be received in full within two weel lote that a 3% processing fee will be added to a WILL PAY BY WIRE TRANSFER A CHECK IN THE AMOUNT OF \$ WSWA IS AUTHORIZED TO CHARGE \$ VISA MASTERCARD AMERICAN	\$ ks of receipt of invoice. Il credit card transactions. MADE PAYABLE TO WSWA, IS ENCLOSED. TO MY N EXPRESS	FOREIGN REGIS AND BANK TRA Send bank transfer Bank 10444 Fairfa Routing No.: 0260 Swift Code: BOFA	NSFERS: rs to: of America O Main Street ax, VA 22030 009593
Off-Site Registration Fee Models TOTAL AMOUNT: PLEASE INDICATE PAYMENT METHOD: All ayment must be received in full within two weel lote that a 3% processing fee will be added to a will pay by wire transfer A CHECK IN THE AMOUNT OF \$	\$ ks of receipt of invoice. Il credit card transactions. MADE PAYABLE TO WSWA, IS ENCLOSED. TO MY N EXPRESS	FOREIGN REGIS AND BANK TRAI Send bank transfer Bank 10444 Fairfa Routing No.: 0260 Swift Code: BOFA Attn: WSWA Accounts	NSFERS: rs to: of America O Main Street ax, VA 22030 109593 AUS3N (International Wires)
Off-Site Registration Fee Models TOTAL AMOUNT: PLEASE INDICATE PAYMENT METHOD: Payment must be received in full within two weel Note that a 3% processing fee will be added to a WILL PAY BY WIRE TRANSFER A CHECK IN THE AMOUNT OF \$	\$ — ks of receipt of invoice. Il credit card transactions. MADE PAYABLE TO WSWA, IS ENCLOSED. TO MY N EXPRESS DISCOVER SS IS SAME AS MAILING ADDRESS PROVIDED IN	FOREIGN REGIS AND BANK TRA Send bank transfer Bank 10444 Fairfa Routing No.: 0260 Swift Code: BOFA Attn: WSWA Accounts IBER NOTE: Initiating for all fees. Send a copy of your bota	NSFERS: rs to: of America O Main Street ax, VA 22030 109593 AUS3N (International Wires) unt No.: 001924342720 ng bank is responsible ank transfer to WSWA along
PLEASE INDICATE PAYMENT METHOD Payment must be received in full within two weel Note that a 3% processing fee will be added to a WILL PAY BY WIRE TRANSFER A CHECK IN THE AMOUNT OF \$	s ks of receipt of invoice. Il credit card transactions. MADE PAYABLE TO WSWA, IS ENCLOSED. TO MY N EXPRESS	FOREIGN REGIS AND BANK TRA Send bank transfer Bank 1044 Fairfa Routing No.: 0260 Swift Code: BOFA Attn: WSWA Account NOTE: Initiating for all fees.	NSFERS: rs to: of America O Main Street ax, VA 22030 109593 AUS3N (International Wires) unt No.: 001924342720 ng bank is responsible ank transfer to WSWA along
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Suite Holder Company Name:			
STEP 7: INCLUDED LOWER LEVEL SUITE	PERSONNEL #1 REGISTRATION & HOTEL		
PLEASE NOTE: This contact will be listed in all printed materials re	ferencing the Lower Level Suite.		
FIRST NAME LAST NAME	NICKNAME (for badge)		
COMPANY	TITLE		
OFFICE MAILING ADDRESS	CITY / STATE / ZIP		
EMAIL (required to receive registration confirmation) WORK PHONE	CELL PHONE		
SPOUSE FIRST NAME (if attending) SPOUSE LAST NAME	E SPOUSE NICKNAME (for badge)		
EMERGENCY CONTACT NAME	PHONE NUMBER		
☐ I DO NOT REQUIRE A HOTEL ROOM ☐ I am local ☐ I am staying off-site*	HOTEL ROOM DEPOSIT: NAM Marriott: \$776.79 (aquivalent to let night's stay plus tay)***		
☐ I requested a personal or traditional suite	JW Marriott: \$336.38 (equivalent to 1st night's stay plus tax)*** The Ritz-Carlton: \$415.13 (equivalent to 1st night's stay plus tax)***		
* If you are staying at a hotel other than the official WSWA hotel, you will be charged the off-site registration fee.)			
☐ I REQUIRE A HOTEL ROOM AT GRANDE LAKES ORLANDO	CREDIT CARD # EXPIRATION DATE		
HOTEL ROOM PREFERENCE:			
☐ JW Marriott: \$299 (plus 12.5% tax) ☐ The Ritz-Carlton: \$369 (plus 12.5% tax)	CARDHOLDERS NAME SIGNATURE		
BED PREFERENCE:** ☐ KING ☐ QUEEN/QUEEN	☐ A CHECK IN THE AMOUNT OF \$, MADE PAYABLE TO GRANDE LAKES ORLANDO IS ENCLOSED.		
** Bedding preferences can be requested; but cannot be guaranteed.	NOTE: The hotel deposit check MUST BE separate from the		
# OF PEOPLE IN ROOM SHARING ROOM WITH	registration payment. *** Grande Lakes Orlando requires that hotel rooms be guaranteed by		
ARRIVAL DAY AND DATE DEPARTURE DAY AND DATE	either credit card or check.		
ADA SPECIAL REQUESTS: AUDIO VISUAL MOBILE			
INCLUDED LOWER LEVEL SHITE DEDSON	NEL # 2 DECISTRATION & HOTEL		
INCLUDED LOWER LEVEL SUITE PERSON	NEL # 2 REGISTRATION & HOTEL		
FIRST NAME LAST NAME	NICKNAME (for badge)		
COMPANY	TITLE		
OFFICE MAILING ADDRESS	CITY / STATE / ZIP		
EMAIL (required to receive registration confirmation) WORK PHONE	CELL PHONE		
SPOUSE FIRST NAME (if attending) SPOUSE LAST NAM			
EMERGENCY CONTACT NAME	PHONE NUMBER		
☐ I DO NOT REQUIRE A HOTEL ROOM	HOTEL ROOM DEPOSIT:		
\square I am local \square I am staying off-site*	JW Marriott: \$336.38 (equivalent to 1st night's stay plus tax)***		
☐ I requested a personal or traditional suite * If you are staying at a hotel other than the official WSWA hotel, you wil	The Ritz-Carlton: \$415.13 (equivalent to 1st night's stay plus tax)***		
be charged the off-site registration fee.)	VISA ☐ MASTERCARD ☐ AMERICAN EXPRESS ☐ DISCOVER		
☐ I REQUIRE A HOTEL ROOM AT GRANDE LAKES ORLANDO	CREDIT CARD # EXPIRATION DATE		
HOTEL ROOM PREFERENCE:			
☐ JW Marriott: \$299 (plus 12.5% tax) ☐ The Ritz-Carlton: \$369 (plus 12.5% tax)	CARDHOLDERS NAME SIGNATURE		
BED PREFERENCE:** KING QUEEN/QUEEN	A CHECK IN THE AMOUNT OF \$,		
** Bedding preferences can be requested; but cannot be guaranteed.	MADE PAYABLE TO GRANDE LAKES ORLANDO IS ENCLOSED. NOTE: The hotel deposit check MUST BE separate from the		
# OF PEOPLE IN ROOM SHARING ROOM WITH	registration payment. *** Grande Lakes Orlando requires that hotel rooms be guaranteed by either		
ARRIVAL DAY AND DATE DEPARTURE DAY AND DATE	credit card or check.		
ADA SPECIAL REQUESTS: AUDIO VISUAL MOBILE			

Suite Holder Company Name:			
You may use multiple copies of this page for ac	dditional Lower Leve	l Suite Personnel Re	gistration and Hotel Reservations.
STEP 8: ADDITIONAL LOWER I	LEVEL SUITE	PERSONNEL	REGISTRATION & HOTEL
FIRST NAME	LAST NAME		NICKNAME (for badge)
COMPANY			TITLE
OFFICE MAILING ADDRESS			CITY / STATE / ZIP
EMAIL (required to receive registration confirmation)	WORK PHONE		CELL PHONE
SPOUSE FIRST NAME (if attending)	SPOUSE LAST NAME		SPOUSE NICKNAME (for badge)
EMERGENCY CONTACT NAME			PHONE NUMBER
□ I DO NOT REQUIRE A HOTEL ROOM □ I am local □ I am staying off-site* □ I requested a personal or traditional suite * If you are staying at a hotel other than the official v be charged the off-site registration fee.) □ I REQUIRE A HOTEL ROOM AT GRANDE LAI HOTEL ROOM PREFERENCE: □ JW Marriott: \$299 (plus 12.5% tax) □ The Ritz-Carlton: \$369 (plus 12.5% tax) BED PREFERENCE:** □ KING □ QUEEN, ** Bedding preferences can be requested; but cannot # OF PEOPLE IN ROOM SHARING ROOM WITH ARRIVAL DAY AND DATE DEPARTURE DAY AND ADA SPECIAL REQUESTS: □ AUDIO □ VIS	/QUEEN t be guaranteed.	The Ritz-Carlton: VISA	6.38 (equivalent to 1st night's stay plus tax)*** 2.\$415.13 (equivalent to 1st night's stay plus tax)*** TERCARD AMERICAN EXPRESS DISCOVER EXPIRATION DATE SIGNATURE MOUNT OF \$
ADDITIONAL LOWER LEVEL S	UITE PERSON	INEL REGISTI	RATION & HOTEL
FIRST NAME	LAST NAME		NICKNAME (for badge)
COMPANY			TITLE
OFFICE MAILING ADDRESS			CITY / STATE / ZIP
			CELL PHONE
SPOUSE FIRST NAME (if attending)	WORK PHONE		SPOUSE NICKNAME (for badge)
	SPOUSE LAST NAME		
EMERGENCY CONTACT NAME			PHONE NUMBER
☐ I DO NOT REQUIRE A HOTEL ROOM ☐ I am local ☐ I am staying off-site* ☐ I requested a personal or traditional suite * If you are staying at a hotel other than the official v be charged the off-site registration fee.)	VSWA hotel, you will	The Ritz-Carlton:	EPOSIT: 6.38 (equivalent to 1st night's stay plus tax)*** \$415.13 (equivalent to 1st night's stay plus tax)*** TERCARD

☐ I REQUIRE A HOTEL ROOM AT GRANDE LAKES ORLANDO

HOTEL ROOM PREFERENCE:

- ☐ **JW Marriott: \$299** (plus 12.5% tax)
- ☐ The Ritz-Carlton: \$369 (plus 12.5% tax)
- BED PREFERENCE:** ☐ KING ☐ QUEEN/QUEEN
- ** Bedding preferences can be requested; but cannot be guaranteed.

OF PEOPLE IN ROOM SHARING ROOM WITH

DEPARTURE DAY AND DATE ARRIVAL DAY AND DATE

ADA SPECIAL REQUESTS:

AUDIO

VISUAL

MOBILE

CREDIT CARD #

☐ A CHECK IN THE AMOUNT OF \$___

EXPIRATION DATE

CARDHOLDERS NAME

SIGNATURE

MADE PAYABLE TO GRANDE LAKES ORLANDO IS ENCLOSED.

NOTE: The hotel deposit check MUST BE separate from the registration payment.

*** Grande Lakes Orlando requires that hotel rooms be guaranteed by either credit card or check.

Suite Holder Company Name:
STEP 9: EXHIBIT BOOTH INFORMATION
OFFICIAL LOWER LEVEL SUITE NAME - MAXIMUM OF 25 CHARACTERS. NOTE : This is how your company will be listed online, in all materials, and in the convention app.
Please indicate product or service provided by your company:
☐ Wine ☐ Spirits ☐ Beer ☐ Non-Alcohol Products or Services ☐ Other:
Please list general company description (25-30 words) for internal purposes. This will not be used for published company description.
PUBLISHED COMPANY INFORMATION:
Once your Lower Level Suite has been assigned and payment has been received in full, you will receive an email with a link and login
information to your online profile. Be sure to login and update your profile, add your full company description, and your product
categories. This information will be published in our printed and digital materials.
NEW BRANDS:
☐ CHECK HERE IF YOU ARE INTRODUCING A NEW BRAND*
Please provide below a general description (20-30 words max) of your new brand. New brands will be highlighted in the NEW BRANDS
section of the WSWA Convention & Exposition Buyers Guide and in our convention mobile app. You will update your online profile with a detailed description. (This will not be used for published new brands description):
*A new brand is defined as a brand or product that is either new to the U.S. market place, or was launched after April 15, 2018.

LOWER LEVEL SUITE REGISTRANT TERMS AND CONDITIONS

REGISTRATION

- Your Registration payment must accompany this form.
- All Registrants must be at least 21 years of age to attend.
- Type or clearly print all information requested.
- Name and company will appear on badge as indicated on this form.
- Individuals registering certify that they are employees of the company indicated.
- All employees working in the Lower Level Suite are required to register.
- Convention registration fees do not include hotel room, or room deposits.

REGISTRATION CANCELLATION AND REFUNDS

- All requests to cancel or substitute Convention registrants must be in writing to the Meetings and Conventions Department. Requests should be emailed to registrations@wswa.org
- Substitution of registrants will be made at **no charge.**
- A 100% refund, less a \$50 processing fee, will be available for Convention registration cancellations received by December 21, 2018.

- A 50% refund will be available for Convention registration cancellations received December 22, 2018 through February 1, 2019.
- Convention registration fee will be **forfeited** for cancellations if received **after February 1, 2019.**
- Refunds will be processed within 14 business days of receipt of cancellation to the original form of payment.

LOWER LEVEL SUITE CANCELLATION AND REFUNDS

- Full payment for the assigned suite must be received within 2 weeks of receiving the suite invoice. Failure to pay for the suite within this time period may result in space being released.
- All requests to cancel Suites must be in writing to the Meetings and Conventions Department. Requests should be emailed to registrations@wswa.org
- Lower Level Suites can be swapped for an alternative available Lower Level Suites up to 20 days prior to the first date of arrival. Requests should be emailed to <u>registrations@</u> <u>wswa.org</u>. Company is responsible for paying any difference in price.
- Cancellations made within 2 weeks of receiving the WSWA invoice will receive a 100% refund, less a \$50 processing fee, if made before January 3, 2019.

Continued on next page

LOWER LEVEL SUITE REGISTRANT TERMS AND CONDITIONS Continued

- Cancellations made after the 2 week period of receiving the WSWA invoice will receive a 50% refund, if made before January 3, 2019.
- Lower Level suite payments will be **forfeited** if cancellation is received **after January 3, 2019,** unless your suite is resold.
- If your cancelled Lower Level Suite is resold, a 50% refund will be processed. All refunds will be processed following the convention and to the original form of payment.

HOTEL GENERAL INFORMATION

- All sleeping room reservation requests are subject to availability.
- All requests for sleeping room reservations must be received at the WSWA office by February 1, 2019. Room requests received after that date will be honored on a space and rate available basis
- All rates are subject to state and local taxes and hotel occupancy taxes.
- One night's room deposit must be made by credit card or check, made payable to Grande Lakes Orlando, for the first night's stay plus tax.

IMPORTANT TO NOTE:

Hotel confirmations will be sent from groupcampaigns@pkghlrss.com

We suggest you add this email address to your safe senders list to prevent your hotel confirmation from going into spam.

QUESTIONS

CALL: 202-371-5682

EMAIL: <u>registrations@wswa.org</u> **WEBSITE:** <u>www.wswaconvention.org</u>

HOTEL RESERVATION CHANGES

 Once you have received your hotel confirmation number, Hotel reservation changes must be made by emailing:

> Kathy Lebron-Diaz Group Accounts Manager Grande Lakes Orlando The Ritz-Carlton, Orlando & JW Marriott, Orlando Kathy.Lebron-Diaz@marriott.com

WSWA will not process hotel reservation changes.

- Cancellations must be made at least 7 days prior to arrival to receive refund of first night's room deposit.
- Hotel cancellations must be made through WSWA in writing to registrations@wswa.org. Grande Lakes Orlando cannot process hotel reservation cancellations.
- WSWA's Federal Employer I.D. # is 43-0590389.

DEADLINES

DECEMBER 21, 2018

- · Last day for receipt of Early Bird registration.
- Last day to cancel and receive a 100% refund less a \$50 processing fee.

FEBRUARY 1, 2019

- Last day for receipt of housing reservation requests. Requests received after this date will be accommodated on a space and rate available basis.
- · Last day for receipt of general reservations.
- Last day for receipt of convention registration cancellations with 50% refund.
- After this date, all payments for cancelled registrations will be forfeited.