



WSWA 7TH ANNUAL CONVENTION & EXPOSITION



APRIL 20-23, 2020 | CAESARS PALACE LAS VEGAS

CAESARS PALACE | TRADITIONAL SUITES | SPACE SUMMARY

SUITE NAME	MAX # OF BDRMS	MAX # OF BEDS	AVAILABLE INVENTORY	WHEELCHAIR ACCESS	MAX CAPACITY SEATED	MAX CAPACITY STANDING	SQUARE FOOTAGE	BUTLER SERVICED	WET BAR
FORUM TOWER									
Classic Suite	2	3	40	-	13	20	1100	N	N
Duplex Suite	4	2	2	-	20	50	3000 - 3500	Y	N*
PALACE TOWER									
Studio Suite	1	2	36	-	5	8	725	N	N
Premium Suite	2	3	18	2	17	25 - 30	2400	N	Y
Executive Suite	2	3	6	-	10	15	1040 - 1935	Y	Y

*Has a small refrigerator, microwave, and wet bar.



TRADITIONAL SUITE OPTIONS

WSWA 77TH ANNUAL CONVENTION & EXPOSITION

April 20-23, 2020
Caesars Palace, Las Vegas



FORUM TOWER DUPLEX SUITE (formerly Forum Tower Emperors Suite)

THE FORUM TOWER DUPLEX SUITE IS A BI-LEVEL SUITE

LEVEL 1



These bedrooms sold separately.

RATE:

- \$3,160 (plus 13.38% tax)
- Two master bedrooms included in suite price.
- Option for up to two connecting bedrooms at a rate of \$245 per room (plus 13.38% tax per night per connector).
- Limited availability.

NOTE:

Furniture cannot be removed from this suite. Bedding can only be removed from **connecting** bedrooms.

LEVEL 2



Master bedrooms

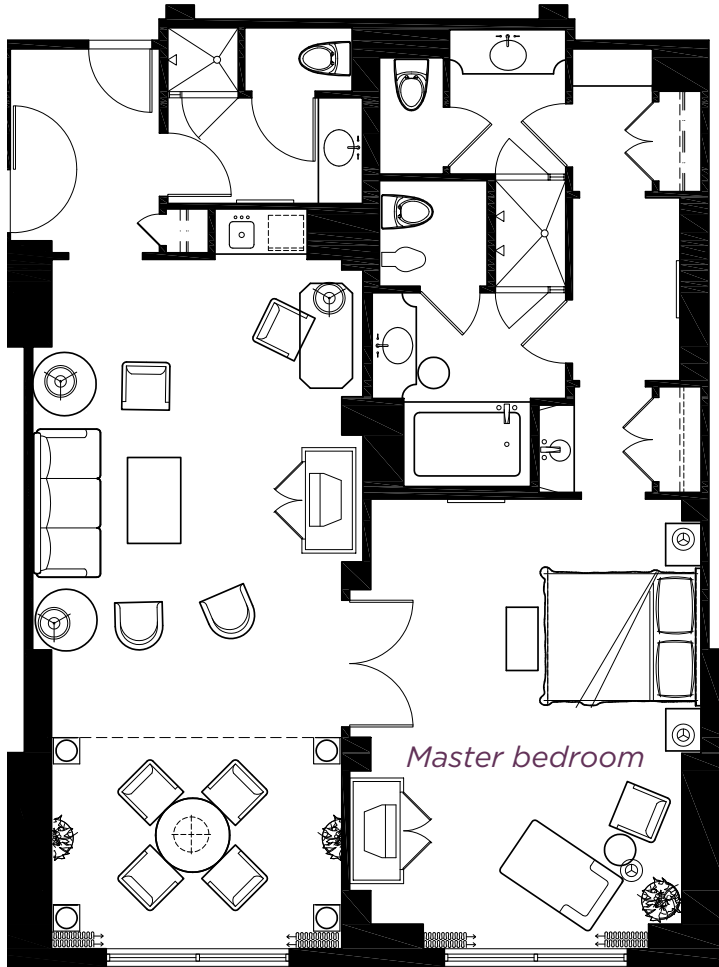
TRADITIONAL SUITE OPTIONS

WSWA 77TH ANNUAL CONVENTION & EXPOSITION

April 20-23, 2020
Caesars Palace, Las Vegas



PALACE TOWER EXECUTIVE SUITE (formerly Palace Tower Emperors Suite)



RATE:

- \$3,180 (plus 13.38% tax)
- Master bedroom included in suite price.
- Option for one connecting bedroom at a rate of \$245 (plus 13.38% tax per night per connector).
- Optional second guestroom nearby.
- Limited availability (must be booked by January 30, 2020).

NOTE:

Furniture cannot be removed from any of the suites. Bedding can only be removed from **connecting** bedrooms and not bedrooms that are part of the suite.

TRADITIONAL SUITE OPTIONS

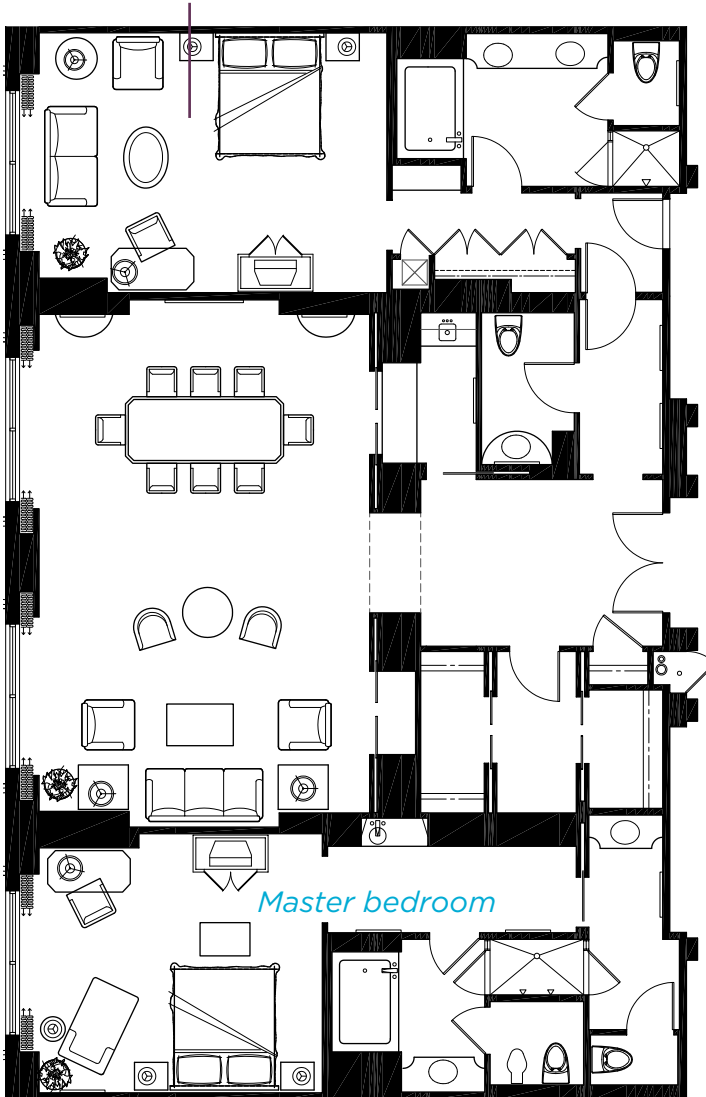
WSWA 77TH ANNUAL CONVENTION & EXPOSITION

April 20-23, 2020
Caesars Palace, Las Vegas



PALACE TOWER PREMIUM SUITE (formerly Palace Tower Senators Suite)

This bedroom sold separately.



RATE:

- \$2,200 (plus 13.38% tax)
- Master bedroom included in suite price.
- Option for one connecting bedroom at a rate of \$245 (plus 13.38% tax per night per connector).
- Optional second guestroom nearby.
- Limited availability.

NOTE:

Furniture cannot be removed from this suite. Bedding can only be removed from **connecting** bedroom.

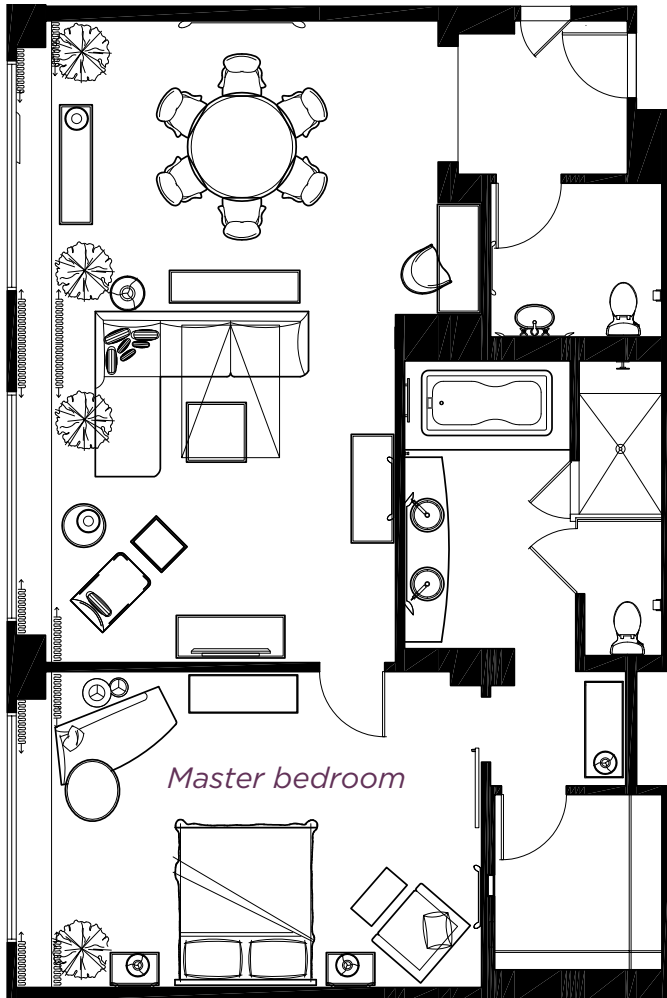
TRADITIONAL SUITE OPTIONS

WSWA 77TH ANNUAL CONVENTION & EXPOSITION

April 20-23, 2020
Caesars Palace, Las Vegas



FORUM TOWER CLASSIC SUITE (formerly Forum Tower Royal Suite)



RATE:

- \$940 (plus 13.38% tax)
- Master bedroom included in suite price.
- Option for one connecting bedroom at a rate of \$245 (plus 13.38% tax per night per connector).
- Optional second guestroom can be requested close-by.

NOTE:

Furniture cannot be removed from this suite. Bedding can only be removed from **connecting** bedroom.

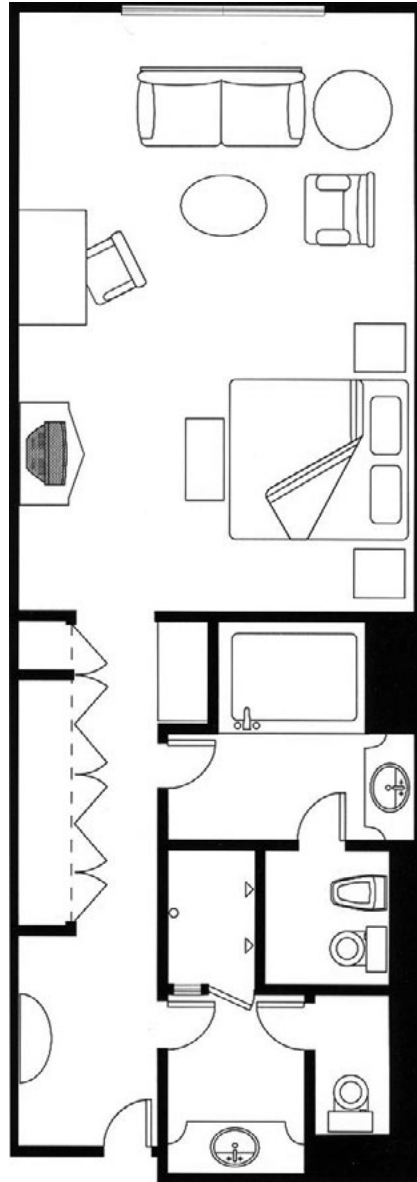
TRADITIONAL SUITE OPTIONS

WSWA 77TH ANNUAL CONVENTION & EXPOSITION

April 20-23, 2020
Caesars Palace, Las Vegas



PALACE TOWER STUDIO SUITE



RATE:

• \$399 (plus 13.38% tax)

NOTE:

Furniture cannot be removed from this suite.

TRADITIONAL SUITE REQUEST FORM

WSWA 77TH ANNUAL
CONVENTION & EXPOSITION

April 20-23, 2020
Caesars Palace Las Vegas



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 registrations@wswa.org. If returning by mail, please type, print clearly or attach a business card.

DIRECTIONS

Complete all sections of this form to reserve a Traditional suite and register attendees.

1. Completed employee registrations must be submitted online or may be sent in along with this form. WSWA will not process suite requests without completed registrations on file.
2. Return this form, along with appropriate registration forms and fees no later than January 10, 2020.
3. Traditional Suite Requests received after January 10, 2020 will be accepted on a space available basis.
4. **This agreement is not valid until a) the registering company has been allocated a suite by WSWA and b) the Traditional Suite Terms & Agreement has been signed and returned.**
5. The mandatory three night stay dates are April 21-23 (Check-out date, Friday, April 24, 2020). Early departure fees will be equivalent to the difference between the number of mandatory nights and the actual nights stayed at the confirmed suite rate.
6. **Please see Suite assignment criteria on the page 2 of this form.**
7. Please be certain to read and agree to the directions and Terms & Conditions set forth on this form and sign STEP 4 (on page 2).

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: TRADITIONAL SUITE REQUEST

The information provided will assist the Suite Committee in making Traditional Suite assignments.

COMPANY NAME

OFFICIAL SUITE NAME TO BE PUBLISHED *(if different from above)*

COMPANY WEBSITE

MAILING ADDRESS

CITY

STATE / ZIP / COUNTRY

MAIN CONTACT NAME *(Main Contact for suite will be published - This person must be registered)*

MAIN CONTACT JOB TITLE

MAIN CONTACT PHONE NUMBER *(to be published)*

MAIN CONTACT ON-SITE CELL *(Will Not be published)*

MAIN CONTACT EMAIL

PRE-CONVENTION / PLANNING CONTACT NAME *(if different from above)*

PRE-CONVENTION CONTACT JOB TITLE

PRE-CONVENTION CONTACT PHONE NUMBER

PRE-CONVENTION CONTACT EMAIL

TOTAL # OF REGISTRANTS

OF YEARS PARTICIPATING

ASSOCIATE MEMBER LEVEL *(if applicable)*

STEP 2: SUITE SELECTION AND CHECK-IN/CHECK-OUT DATES

- See Traditional Suite Layouts for Suite options.
- Suite holders must also register their attendees. This can be done online or by completing STEP 10 of this form. Suites will not be assigned to companies who do not have attendees registered for the convention.

BED REMOVAL

(In connecting room only)

FIRST CHOICE TRADITIONAL SUITE TYPE

OF BEDROOMS CONNECTED* *(if applicable)*

RATE PER NIGHT

Yes No

SECOND CHOICE TRADITIONAL SUITE TYPE

OF BEDROOMS CONNECTED* *(if applicable)*

RATE PER NIGHT

Yes No

THIRD CHOICE TRADITIONAL SUITE TYPE

OF BEDROOMS CONNECTED* *(if applicable)*

RATE PER NIGHT

Yes No

* Connecting Bedrooms refers to **additional** sleeping rooms that connect to the main suite, **not** bedrooms that are **included** in the suite layout.

Suite Holder Company Name: _____

STEP 2: SUITE SELECTION AND CHECK-IN/CHECK-OUT DATES *(Continued)*

All Traditional Suites must be open no later than 12:00 pm on Tuesday, April 21. The default hotel check-out date is Friday, April 24. Early departure fees apply. **PLEASE NOTE: Suite check-in is 4:00 pm on the day of arrival and check-out is 11:00 am on the day of departure. Early check-in cannot be guaranteed. Please plan set-up and tear down time accordingly.**

Arrival Day/Date: Sunday, April 19 **OR** Monday, April 20 **OR** Tuesday, April 21 *(opening day)* Approx Arrival Time: _____
Departure Day/Date: Friday, April 24

WILL THE BEDROOM(S) IN THE SUITE BE USED AS A SLEEPING ROOM(S)? Yes *(provide primary occupant information below)* No

FIRST / LAST NAME _____ PHONE NUMBER _____ EMAIL _____

If requesting additional connecting rooms, **OR** rooms that must be nearby your suite, please complete the information below. Be certain to indicate who will be staying in each of the connecting bedrooms, and provide arrival and departure dates.

ROOM 1: Connecting Room *(if available)* Nearby Room

PRIMARY OCCUPANT FIRST / LAST NAME _____ PHONE NUMBER _____ EMAIL _____

Arrival Day and Date: _____ Departure Day and Date: _____

ROOM 2: Connecting Room *(if available)* Nearby Room

PRIMARY OCCUPANT FIRST / LAST NAME _____ PHONE NUMBER _____ EMAIL _____

Arrival Day and Date: _____ Departure Day and Date: _____

STEP 3: TRADITIONAL SUITE DEPOSIT

PLEASE INDICATE PAYMENT METHOD*:

** a 3% processing fee will be added to all credit card transactions*

- A CHECK IN THE AMOUNT OF \$ _____, IS ENCLOSED.
MAKE CHECK PAYABLE TO CAESARS PALACE LAS VEGAS
- CHARGE \$ _____ TO MY
- VISA MASTERCARD AMERICAN EXPRESS DISCOVER
- CHECK HERE IF CREDIT CARD BILLING ADDRESS IS SAME AS MAILING ADDRESS PROVIDED IN STEP 1.

CREDIT CARD # _____ EXPIRATION DATE _____ CIV NUMBER _____

CARDHOLDERS NAME _____ ADDRESS ASSOCIATED WITH CREDIT CARD _____

CARDHOLDERS SIGNATURE _____ CITY / STATE / ZIP / COUNTRY _____

Credit cards cannot be processed without the necessary credit information and signature. **WSWA will forward your credit card information to the hotel once your suite has been assigned.**

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

Caesars Palace Las Vegas requires that hotel rooms be guaranteed by either credit card or check.

SUITE ASSIGNMENT CRITERIA

Suite notifications will be sent early February 2020. Exhibit and Suite Service Manual will be posted to www.wswaconvention.org January 2020

SUITES WILL BE ASSIGNED BY THE TRADITIONAL SUITE COMMITTEE BASED ON THE FOLLOWING CRITERIA:

- The number of personnel the company registers to attend the WSWA Convention.
- Associate Membership status.
- Number of sleeping rooms requested at the official WSWA hotel(s).
- Number of years company has participated in WSWA Convention.
- Suite assignments the company has received at past WSWA Conventions.
- Date of receipt of company's suite request - all suite requests and company affiliated registrations must be received no later than January 10, 2020.

STEP 4: I HAVE READ AND UNDERSTAND THE SUITE ASSIGNMENT CRITERIA SET FORTH ABOVE AND SUITE ASSIGNMENT CRITERIA SET FORTH ON THIS FORM

Signature: _____ Date: _____

FOR OFFICE USE ONLY

REG ID #: _____ DATE REC'D: _____ CHECK #: _____ WRITTEN CANCELLATION: _____ DATE REC'D: _____ CHECK #: _____ AMNT RTRND: _____

Suite Holder Company Name: _____

STEP 5: COMPANY INFORMATION

Please indicate product or service provided by your company:

Wine Spirits Non-Alcohol Products Services Other _____

Please list general (25-30 words) category/company description for committee assignment purpose.
(This will **not** be used for published company description):

PUBLISHED COMPANY INFORMATION:

You will receive an email toward the middle of February with instructions to access your company's on-line profile. Be certain to log-in and input your product categories and company description. The information provided will be published in our digital and printed materials. WSWA will not modify entries, so care should be given to spelling and grammar.

NEW BRANDS:

CHECK HERE IF YOU ARE INTRODUCING A NEW BRAND*

Please provide below a detailed description (100 word max) of your new brand. This information will be published in the NEW BRANDS section of our digital and printed materials. You may also add new brands to your online profile.

***A new brand is defined as a brand or product that is either new to the U.S. market place, or was launched after March 30, 2019.**

STEP 6: ATTENDEE REGISTRATION FEES

Registration* Please select fee(s)

Fees are per person and **DO NOT** include hotel rooms.

	Early Bird Registration Rec'd by January 10	General Registration Rec'd between Jan 11-Mar 6	On-site Registration Rec'd after March 6
Associate (Staying on-site)	<input type="checkbox"/> \$1,100	<input type="checkbox"/> \$1,250	<input type="checkbox"/> \$1,400
Associate (Staying off-site)	<input type="checkbox"/> \$1,500	<input type="checkbox"/> \$1,650	<input type="checkbox"/> \$1,800
Associate Spouse	<input type="checkbox"/> Complimentary	<input type="checkbox"/> Complimentary	<input type="checkbox"/> Complimentary
Non-Member (Staying on-site)	<input type="checkbox"/> \$1,200	<input type="checkbox"/> \$1,350	<input type="checkbox"/> \$1,500
Non-Member Spouse (Staying on-site)	<input type="checkbox"/> \$695	<input type="checkbox"/> \$720	<input type="checkbox"/> \$745
Non-Member (Staying off-site)	<input type="checkbox"/> \$1,600	<input type="checkbox"/> \$1,750	<input type="checkbox"/> \$1,900
Non-Member Spouse (Staying off-site)	<input type="checkbox"/> \$1,095	<input type="checkbox"/> \$1,120	<input type="checkbox"/> \$1,145

* \$35 of your registration fee goes to the WSWA Educational Foundation to help fund college scholarships.

STEP 7: SPONSORSHIP OPPORTUNITY

- I am interested in becoming a sponsor of the WSWA Convention & Exposition. Please send me information.
 I am not interested in sponsoring this year.

STEP 8: TASTE OF THE INDUSTRY

SAVE MONEY BY RESERVING YOUR TASTE OF THE INDUSTRY TABLE AT THE SAME TIME AS YOUR SUITE.

Taste of the Industry Table Fees

	Early Bird Registration Rec'd by January 10	General Registration Rec'd between Jan 11-Mar 6	On-site Registration Rec'd after March 6
Taste of the Industry Table Exhibitor, Suite Holder, WSWA Associate Members	<input type="checkbox"/> \$575	<input type="checkbox"/> \$675	<input type="checkbox"/> \$800
Complimentary Taste of the Industry Table benefit of 2020 Diamond, Platinum or Gold Associate Membership	<input type="checkbox"/> Complimentary	<input type="checkbox"/> Complimentary	<input type="checkbox"/> Complimentary
Model Badge (Limit two per table)	<input type="checkbox"/> \$100	<input type="checkbox"/> \$100	<input type="checkbox"/> \$100
CMT Model Promotional Rate* (Limit two per table)	<input type="checkbox"/> Complimentary	<input type="checkbox"/> Complimentary	<input type="checkbox"/> Complimentary

* Must be able to verify models were hired through CMT Model Agency.

Suite Holder Company Name: _____

STEP 9: PAYMENT FOR REGISTERED ATTENDEES AND TASTE OF THE INDUSTRY

ITEM	TOTAL #	FEE per Item	TOTAL
Registered Attendees	_____	_____	_____
Taste of the Industry Tables	_____	_____	_____
Models	_____	_____	_____
TOTAL AMOUNT DUE TO WSWA:			_____

PLEASE INDICATE PAYMENT METHOD:

Payment must be received in full within two weeks of receipt of invoice. Note that a 3% processing fee will be added to all credit card transactions.

- A CHECK FOR ATTENDEE REGISTRATIONS AND TASTE OF THE INDUSTRY TABLES IN THE AMOUNT OF \$ _____, MADE PAYABLE TO WSWA, IS ENCLOSED.
 WSWA IS AUTHORIZED TO CHARGE \$ _____ TO MY VISA MASTERCARD AMERICAN EXPRESS DISCOVER
 CHECK HERE IF BILLING ADDRESS IS SAME AS IN STEP 3

CREDIT CARD # _____ EXPIRATION DATE _____ CIV NUMBER _____
CARDHOLDERS NAME _____ ADDRESS ASSOCIATED WITH CREDIT CARD _____ CITY / STATE / ZIP / COUNTRY _____
CARDHOLDERS SIGNATURE _____

STEP 10: ENTER TRADITIONAL SUITE PERSONNEL

TRADITIONAL SUITE PERSONNEL #1 REGISTRATION & HOTEL

Your personnel can be registered and hotel room reservations made by completing the information below, or alternatively at wswaconvention.org. **Personnel #1 will be listed in all digital and printed materials as the main point of contact.**

FIRST NAME _____ LAST NAME _____ NICKNAME (for badge) _____
COMPANY _____ JOB TITLE _____
OFFICE MAILING ADDRESS _____ CITY / STATE / ZIP / COUNTRY _____
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 will be sleeping in the Traditional Suite

* If you are staying at a hotel other than Caesars Palace, you will be charged the off-site registration fee.

I REQUIRE A HOTEL ROOM AT CAESARS PALACE

DELUXE ROOM: \$245 (plus 13.38% tax)

BED PREFERENCE:** KING QUEEN/QUEEN

** Bedding preferences can be requested; but cannot be guaranteed.

OF PEOPLE IN ROOM _____ SHARING ROOM WITH _____

ARRIVAL DAY AND DATE _____ DEPARTURE DAY AND DATE _____

ADA SPECIAL REQUESTS: AUDIO VISUAL MOBILE

HOTEL ROOM DEPOSIT:

DELUXE ROOM: \$277.78 (equivalent to 1st night's stay plus tax)***

- CHARGE SAME CARD AS THE TRADITIONAL SUITE RESERVATION
 VISA MASTERCARD AMERICAN EXPRESS DISCOVER

CREDIT CARD # _____ EXPIRATION DATE _____

CARDHOLDERS NAME _____ SIGNATURE _____

- A CHECK IN THE AMOUNT OF \$ _____,

MADE PAYABLE TO CAESARS PALACE LAS VEGAS IS ENCLOSED.

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

*** Caesars Palace Las Vegas requires that hotel rooms be guaranteed by either credit card or check.

Suite Holder Company Name: _____

You may use multiple copies of this page for additional Personnel Registration and Hotel Reservations.

ADDITIONAL TRADITIONAL SUITE PERSONNEL REGISTRATION & HOTEL

FIRST NAME _____	LAST NAME _____	NICKNAME (for badge) _____
COMPANY _____	JOB TITLE _____	
OFFICE MAILING ADDRESS _____		CITY / STATE / ZIP / COUNTRY _____
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 will be sleeping in the Traditional Suite

* If you are staying at a hotel other than Caesars Palace, you will be charged the off-site registration fee.

I REQUIRE A HOTEL ROOM AT CAESARS PALACE

DELUXE ROOM: \$245 (plus 13.38% tax)

BED PREFERENCE:** KING QUEEN/QUEEN

** Bedding preferences can be requested; but cannot be guaranteed.

OF PEOPLE IN ROOM _____ SHARING ROOM WITH _____

ARRIVAL DAY AND DATE _____ DEPARTURE DAY AND DATE _____

ADA SPECIAL REQUESTS: AUDIO VISUAL MOBILE

HOTEL ROOM DEPOSIT:

DELUXE ROOM: \$277.78 (equivalent to 1st night's stay plus tax)***

CHARGE SAME CARD AS THE TRADITIONAL SUITE RESERVATION

VISA MASTERCARD AMERICAN EXPRESS DISCOVER

CREDIT CARD # _____ EXPIRATION DATE _____

CARDHOLDERS NAME _____ SIGNATURE _____

A CHECK IN THE AMOUNT OF \$ _____.

MADE PAYABLE TO CAESARS PALACE LAS VEGAS IS ENCLOSED.

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

*** Caesars Palace Las Vegas requires that hotel rooms be guaranteed by either credit card or check.

ADDITIONAL TRADITIONAL SUITE PERSONNEL REGISTRATION & HOTEL

FIRST NAME _____	LAST NAME _____	NICKNAME (for badge) _____
COMPANY _____	JOB TITLE _____	
OFFICE MAILING ADDRESS _____		CITY / STATE / ZIP / COUNTRY _____
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 will be sleeping in the Traditional Suite

* If you are staying at a hotel other than Caesars Palace, you will be charged the off-site registration fee.

I REQUIRE A HOTEL ROOM AT CAESARS PALACE

DELUXE ROOM: \$245 (plus 13.38% tax)

BED PREFERENCE:** KING QUEEN/QUEEN

** Bedding preferences can be requested; but cannot be guaranteed.

OF PEOPLE IN ROOM _____ SHARING ROOM WITH _____

ARRIVAL DAY AND DATE _____ DEPARTURE DAY AND DATE _____

ADA SPECIAL REQUESTS: AUDIO VISUAL MOBILE

HOTEL ROOM DEPOSIT:

DELUXE ROOM: \$277.78 (equivalent to 1st night's stay plus tax)***

CHARGE SAME CARD AS THE TRADITIONAL SUITE RESERVATION

VISA MASTERCARD AMERICAN EXPRESS DISCOVER

CREDIT CARD # _____ EXPIRATION DATE _____

CARDHOLDERS NAME _____ SIGNATURE _____

A CHECK IN THE AMOUNT OF \$ _____.

MADE PAYABLE TO CAESARS PALACE LAS VEGAS IS ENCLOSED.

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

*** Caesars Palace Las Vegas requires that hotel rooms be guaranteed by either credit card or check.

TRADITIONAL SUITE REGISTRANT TERMS AND CONDITIONS

REGISTRATION

- **Your Registration payment must accompany this form if you completed the attendee registration sections.**
- **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.
- Convention registration fees **do not** include hotel room, or room deposits.
- All Traditional Suites must have at least one attendee registered.

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 January 10, 2020**.
- A **50% refund** will be available for Convention registration cancellations received **January 11 through March 6, 2020**.
- Convention registration fees will be **forfeited** for cancellations received **after March 6, 2020**.
- Refunds will be processed within 14 business days of receipt of cancellation 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 March 6, 2020**. 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 Caesars Palace Las Vegas, for the first night's stay plus tax.

IMPORTANT TO NOTE:

Hotel confirmations will be sent from groupcampaigns@pkghlrs.com
We suggest you add this email address to your safe senders list to prevent your hotel confirmation from going into spam.

TRADITIONAL SUITE CANCELLATIONS

- All cancellations must be made in writing to registrations@wswa.org
- Suites may be canceled at no charge up to **March 6, 2020**.
- Cancellation of suites between **March 7, 2020** and **April 10, 2020** will result in loss of 1st night room deposit.
- Cancellations made after **April 10, 2020** will result in loss of 100% of the cost of the suite.

WSWA's Federal Employer I.D. # is 43-0590389

HOTEL ROOM RESERVATION CHANGES

- **Hotel reservation changes** must be made in writing. Please email Kristi Hepner, WSWA Coordinator, Meetings and Conventions, kristi@wswa.org
- **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. Caesars Palace Las Vegas cannot process hotel reservation cancellations.

DEADLINES

JANUARY 10, 2020

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

MARCH 6, 2020

- 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.
- Last day to cancel Traditional Suite for full refund.

LAST DAY: APRIL 10, 2020

- Last day to cancel Traditional Suite with only 1st night room deposit loss.
- All Traditional Suites canceled after this date will be responsible for full suite payment.

QUESTIONS

CALL: 202-371-5682

EMAIL: registrations@wswa.org

WEBSITE: www.wswaconvention.org

STEP 15: I HAVE READ AND AGREE TO THE TERMS AND CONDITIONS SET FORTH ON THIS FORM

Signature: _____ Date: _____