

Registration Form

2020 WESTERN CHAPTER ISA CONFERENCE & TRADE SHOW

Name: _____
Organization: _____
Street Address: _____
City/State/Zip: _____

WCISA Member ID: _____
Phone: _____
Fax: _____
Email: _____

This is my first WCISA Conference Contact information is new, please update WCISA records

Guest's Name: _____

Check here to opt out of sharing contact information with other attendees and exhibitors (Name, company and email)

Special Meal Request: Vegetarian Vegan Gluten-free Other: _____

FULL CONFERENCE REGISTRATION:

Includes: Full Access to all conference programs – live and on demand

Member **\$300.00**
 Non Member **\$350.00**
 Senior **\$100.00**
 Student **contact office**

SINGLE DAY REGISTRATION:

Includes: single day's educational sessions

Member **\$120.00**
 Non Member **\$150.00**

Select Day: Monday Tuesday Wednesday

Return this form along with payment or charge card number to:

We accept Visa, Master Card and American Express
Make checks payable to Western Chapter ISA

Payment information:

Credit Card or Check #: _____ CVV: _____ Exp: _____

CC Type: [] MC [] VI [] AMX Signature: _____

TOTAL REGISTRATION FEES: \$ _____

WCISA Chapter Office – 866/785-8960
31910 Country Club Drive, Porterville, CA 93257
Fax 559/784-8711 or email registration@wcisa.net

GRAND TOTAL DUE: \$ _____

Sorry - no refund after 11/1/2020: All proceeds from cancellations will be donated to The Britton Fund, Inc.



We are going virtual!

Reach your Highest Peak

86th Annual Conference & Trade Show

November 9-11, 2020

An Online Experience

wcisaconnect.com