

2011 NADA REGISTRATION AND HOUSING FORM

SAN FRANCISCO, CALIFORNIA • FEBRUARY 5-7, 2011

REGISTRATION AND HOUSING DEADLINE: JANUARY 27, 2011

**Cancellation Deadline: Registration-January 27, 2011
Housing-January 27, 2011 by 5 pm CST**

Registration cancellations must be in writing in order to receive a refund minus a \$35 processing fee per individual cancellation. To cancel your registration/hotel reservation, please fax or email your written request to **301-694-5124** or **nada@experient-inc.com**.

Prefix	First Name	Initial	Last Name	Suffix
Prefix	Spouse/Relative First Name	Initial	Last Name	
Badge Name		Spouse/Relative Badge Name		
Company Name				
Address				
City		State	Zip	Country
Business Phone		Fax		
Registrant Email Address			CC: Email Address	

*A separate email address is required for each registrant. NADA will not give out your email address. This email is used to provide you with confirmation, as well as send you convention related information from NADA only.

- Please check here: It is okay for NADA to send me emails relating to the convention.
 Please check here: I would like to provide Exhibitor's with my email address on my electronic business card onsite.

	EARLY by Sept. 10	ADVANCE Sept. 11-Jan. 27	ONSITE Jan. 28-Onsite
NADA MEMBERS			
<input type="checkbox"/> Dealer (DLR)	\$195	\$220	\$295
<input type="checkbox"/> Dealership Manger (MGR)	\$195	\$220	\$295
NON MEMBER			
<input type="checkbox"/> Dealer (DLR)	\$360	\$385	\$435
<input type="checkbox"/> Dealership Manger (MGR)	\$360	\$385	\$435
SPOUSE/RELATIVE (Must be accompanied by a registered dealer or manager)			
<input type="checkbox"/> Spouse/Relative	\$150	\$175	\$235
ALLIED INDUSTRY			
<input type="checkbox"/> Exhibit Only (ALL)	\$235	\$260	\$320
<input type="checkbox"/> Workshop (ALLW)	\$360	\$385	\$435
NADA WELCOME RECEPTION CO-HOSTED BY J.D. POWER AND ASSOCIATES AND WOMEN DEALER'S BREAKFAST* (Availability limited due to room capacity)			
<input type="checkbox"/> Reception Dealer/Manager/Spouse (limit 2)	\$49	Qty _____	<input type="checkbox"/> Women Dealer's Breakfast \$65
<input type="checkbox"/> Reception Allied Industry (limit 1)	\$79	*Ticket to reception and/or breakfast is non-refundable	
TOTAL REGISTRATION FEES:			

HOTEL PREFERENCE - Please select a minimum of three (3) different hotels:

Arrival Date: _____ Departure Date: _____

1st Choice _____
 2nd Choice _____
 3rd Choice _____
 4th Choice _____

Special Room Requests will be forwarded to the hotel. Special requests are NOT guaranteed. Please reconfirm your special request upon check-in at the hotel.

NOTE: 1 night room and tax will be charged by the hotel in January 2011.

Room Type:	Special Requests:
<input type="checkbox"/> SINGLE (1 person, 1 bed)	<input type="checkbox"/> KING BED
<input type="checkbox"/> DOUBLE (2 ppl, 1 bed)	<input type="checkbox"/> TWO BEDS
<input type="checkbox"/> DBL/DBL (2 ppl, 2 beds)	<input type="checkbox"/> NON-SMOKING
<input type="checkbox"/> TRIPLE	<input type="checkbox"/> SMOKING
<input type="checkbox"/> QUAD	<input type="checkbox"/> HANDICAP ACCESSIBLE
<input type="checkbox"/> 1 BEDROOM SUITE	
<input type="checkbox"/> 2 BEDROOM SUITE	

Online: www.nadaconventionandexpo.org

Fax: 301-694-5124

Mail: NADA Registration and Housing
 c/o Experient
 P.O. Box 4088
 Frederick, MD 21705

Do you want your name badge mailed to you in advance? You will need to pick-up your badge holder and convention bag onsite.

Yes No

Franchises Sold:

- _____
- _____
- _____
- _____

Which of the following BEST describes your job title/function?

- A. Dealer/Principal
 B. General Manager
 C. CFO-Controller
 D. New Car Manager
 E. Used Car Manager
 F. Service Manager
 G. Parts Manager
 H. Allied Industry Affiliate

What is your age?

- A. <24 B. 25-34
 C. 35-44 D. 45-54
 E. 55-64 F. >65

Which of the following best describes your organization?

- A. Individual Dealership
 B. Chain Dealership
 C. Publicly Owned Dealership
 D. Auto Industry Affiliate

What role(s) do you play in the purchase of products/services from companies exhibiting at the NADA Convention?

- A. Final Say
 B. Specify Supplier
 C. Recommend

Approximately how much do you or your company anticipate spending as a result of attending the Expo?

- <\$5,000
 \$5,001 to \$10,000
 \$10,001 to \$25,000
 \$25,001 to \$50,000
 \$50,001 to \$100,000
 Over \$100,000

Is this your first NADA Convention & Expo?

Yes No

PAYMENT INFORMATION

Forms received without payment will not be processed.

PAY BY CHECK

enclosed for REGISTRATION fees ONLY. Please complete the credit card information below to reserve your hotel. (Make payable to NADA)

PAY BY CREDIT CARD

Amex MasterCard Visa

CARD NUMBER _____

EXPIRATION DATE (Must be AFTER Feb. 2011) _____

CARDHOLDER'S NAME _____

CARDHOLDER'S SIGNATURE _____

 If you will need special services, please contact Terri Collins at 703-821-7140 or tcollins@nada.org.