

# REGISTRATION FORM

Check here if name and address are to be corrected on ICSC's records to conform to information below.  
Note: Changes in company membership can only be done if paid by the individual.  
PLEASE PHOTOCOPIY FORM AS NEEDED.

**RETURN TO:**  
**INTERNATIONAL COUNCIL OF SHOPPING CENTERS**  
P.O. Box 26958  
New York, NY 10087-6958  
**FAX:** (732) 694-1800  
**ONLINE:** [www.icsc.org](http://www.icsc.org)

## REGISTRATION INFORMATION

**Individual Membership Number\*** (As it appears on your membership card.) \_\_\_\_\_

\*To qualify for the member rate, each registrant must be an ICSC member. A company membership does not entitle every employee of that company to register at the member rate.

Last Name \_\_\_\_\_ First Name \_\_\_\_\_

Company Name \_\_\_\_\_ Title \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_ Country \_\_\_\_\_ Zip/Postal Code \_\_\_\_\_

Business Telephone \_\_\_\_\_ Fax Number \_\_\_\_\_ E-Mail \_\_\_\_\_

**SPOUSE PROGRAM** Indicate name of Convention registrant \_\_\_\_\_

Last Name \_\_\_\_\_ First Name \_\_\_\_\_

Badge and Correspondence Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_ Country \_\_\_\_\_ Zip/Postal Code \_\_\_\_\_

Fax Number \_\_\_\_\_ E-Mail \_\_\_\_\_

## MEETING REGISTRATION FEES (Select One)

<b>ICSC Members</b>	<b>\$345</b> (Advance)	<b>\$445</b> (On-Site)	}	\$ _____	}	<b>TOTAL AMOUNT DUE \$ _____</b>
<b>Non-members</b>	<b>\$690</b> (Advance)	<b>\$890</b> (On-Site)				
Pay the member rate by joining ICSC today.						
<b>Spouse Program</b>	<b>\$345</b> (Advance)	<b>\$445</b> (On-Site)	}	\$ _____		
<b>ICSC MEMBERSHIP FEE</b> (For Non-members)						
<b>Regular and Associate</b>		<b>\$800*</b>	}	\$ _____		
<b>Affiliate and Public/Academic</b>		<b>\$100*</b>				
<b>Public/Academic Affiliate</b>		<b>\$ 50*</b>				

\*See Membership Information page 25 for details.

## METHOD OF PAYMENT

 All prices are in U.S. funds.

Check or money order made payable to ICSC enclosed for \$ \_\_\_\_\_ or  MasterCard  VISA  AMEX  Discover \$ \_\_\_\_\_

Name (as it appears on credit card) \_\_\_\_\_ Signature \_\_\_\_\_

Credit Card Number (include all digits) \_\_\_\_\_ Expiration Date \_\_\_\_\_

## REGISTRATION DEADLINES

Register by March 31, 2006 to receive your badge in the mail...quick and hassle-free. Registrants who pay the member rate must be a member in good standing on March 31 to retain that rate and receive a badge in the mail. All Convention and Spouse Program badges will be mailed at the end of April with instructions. Upon arriving in Las Vegas just stop by the Registration Center at the Las Vegas Convention Center or at one of the remote satellite airport locations to pick up your badge holder and program information. It's that simple.

- March 31, 2006** Register by deadline to receive your Convention badge in the mail and to be listed in the Advance Registrants Directory.
- April 28, 2006** Deadline to pre-register before arriving in Las Vegas. Registrations will not be accepted after this date.
- May 20, 2006** Registrations will be accepted on-site in Las Vegas.

**CANCELLATIONS:** If you are unable to attend the Convention, you may cancel up to March 31, 2006 and receive a refund. All cancellations are subject to a \$25 cancellation fee and requests for refunds must be received by ICSC in writing. No refunds will be issued after March 31.

**ADA:** Any disabled individual desiring an auxiliary aid for this meeting should notify ICSC at least five weeks prior to the meeting.

**CONTINUING EDUCATION CREDITS:**  
SCSM/SCMD: 1.5 credits; CLS: 1.5 credits