

# CHAIRMAN'S GOLD CIRCLE REGISTRATION FORM

**RETURN TO: INTERNATIONAL COUNCIL OF SHOPPING CENTERS**  
 P.O. Box 26958, New York, NY 10087-6958  
**FAX:** +1 732 694 1800 **ONLINE:** [www.chairmansgoldcircle.com](http://www.chairmansgoldcircle.com)

**PHOTO ID BADGES REQUIRED**  
 All attendees and all exhibitors are required to have an ICSC-issued color photo badge for access to the Convention, Leasing Mall and Trade Exposition. To submit a photo visit [www.icsc.org/photo\\_instr.html](http://www.icsc.org/photo_instr.html).

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.

## 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 \_\_\_\_\_ Email \_\_\_\_\_

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

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

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

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

Fax Number \_\_\_\_\_ Email \_\_\_\_\_

## MEETING REGISTRATION FEES (Select One)

**ICSC Member**     \$345 (Advance)     \$495 (On-Site)     }     \$ \_\_\_\_\_

**Non-Member**     \$740 (Advance)     \$940 (On-Site)     }     \$ \_\_\_\_\_

Pay the member rate by joining ICSC today.

**Spouse Program**     \$345 (Advance)     \$495 (On-Site)     }     \$ \_\_\_\_\_

## ICSC MEMBERSHIP FEE (For Non-Members)

**Regular and Associate**     \$800     }     \$ \_\_\_\_\_

**Affiliate and Public/Academic**     \$100     }     \$ \_\_\_\_\_

**Public/Academic Affiliate**     \$ 50     }     \$ \_\_\_\_\_

**TOTAL AMOUNT DUE**     }     \$ \_\_\_\_\_

## REGISTRATION DEADLINES

Register and submit a photo by March 15, 2007 to receive your badge in the mail. No badges will be mailed without a photo. Registrants who pay the member rate must be a member in good standing on March 15 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 hotel and airport locations to validate your badge and pick up your badge holder and program information.

## 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 \_\_\_\_\_

**CANCELLATIONS:** If you are unable to attend the Convention, you may cancel up to March 15, 2007 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 15.

**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