

# AIBD 65th Annual Convention - General Registration

Omni Providence Hotel ♦ Providence, RI ♦ August 4-7, 2015

**Online Registration Closes  
July 30, 2015**

## Industry Professional Registrations \*

Qty.	(Post Marked)		
	By June 30	By July 30	On Site
___ AIBD Member	\$265.00	\$285.00	\$295.00
___ Non-Members	\$310.00	\$330.00	\$340.00

## Spouse/Child/Guest Registrations \*\*

Qty.	(Post Marked)		
	By June 30	By July 30	On Site
___ Accompanying an AIBD member	\$265.00	\$285.00	\$295.00
___ Accompanying a non-member	\$310.00	\$330.00	\$340.00
___ Children	\$0.00	\$0.00	\$0.00

## Other Registrations

### Friday, August 7

Qty.	Member	Non-Member
___ Architectural Tour (Limited to 50)	\$100	\$115
___ Reception & ARDA Awards Dinner	\$100	\$115

### \* An Industry Registration Includes

**Tuesday, August 4, 2015**  
Welcome Reception at the Providence Arcade

**Wednesday, August 5, 2015**  
Welcome Breakfast  
Educational Sessions  
Networking Lunch & AIBD Annual Meeting  
Dinner & Trade Show

**Thursday, August 6, 2015**  
Continental Breakfast  
Educational Sessions  
Networking Buffet Lunch

### \*\* A Spouse, Guest or Child Registration Includes

**Tuesday, August 4, 2015**  
Welcome Reception at the Providence Arcade

**Wednesday, August 5, 2015**  
Welcome Breakfast  
Muse Paint Bar—Lunch, summer cocktails & painting  
Dinner & Trade Show

**Thursday, August 6, 2015**  
Savor Rhode Island Federal Hill Foodie Tour

**For More info: [WWW.AIBDCONVENTION.COM](http://WWW.AIBDCONVENTION.COM)**

Company: \_\_\_\_\_

Attendee's Name: \_\_\_\_\_ Mobile Phone #: \_\_\_\_\_

Email: \_\_\_\_\_

Attendee's Name: \_\_\_\_\_ Mobile Phone #: \_\_\_\_\_

Email: \_\_\_\_\_

Attendee's Name: \_\_\_\_\_ Mobile Phone #: \_\_\_\_\_

Email: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

**PAYMENT INFORMATION:**  VISA  MasterCard  American Express  Discover  **Paying by check (By mail)**

Total Amount to be Charged: \$ \_\_\_\_\_ Discount Code: \_\_\_\_\_

Credit Card Number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Cardholder's Name: \_\_\_\_\_

Credit Card Billing Address: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_



Mail Checks Payable to:

Fax to:

All Mailings to:

AIBD  
(866) 204-0293  
AIBD Convention  
725 N A1A, Suite E-108  
Jupiter, FL 33477

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BUILDING DESIGN

Additional information and a schedule may be found at: [www.AIBDconvention.com](http://www.AIBDconvention.com)