

# 23<sup>RD</sup> ANNUAL MEETING & EXPO

Gaylord Opryland Hotel and Convention Center • Nashville, TN • April 22 - 24, 2013

**Complete this registration form and return it with full payment. This form may be duplicated for additional registrants. Do not mail this form if registering online or by fax. Please type or print clearly.**

**Mail or fax completed registration form with full payment to:**

ITS America 2013 Fax: 301.694.5124  
 c/o Experient  
 P.O. Box 4088  
 Frederick, MD 21705

**CANCELLATION POLICY**

**Cancellation requests must be submitted in writing by February 28, 2013 for a full refund.** Requests received from March 1 - March 15, 2013 are subject to a \$175.00 processing fee. No refunds will be honored after March 15. Substitutions and changes are permitted through April 2, 2013.

**PART I: CONTACT INFORMATION**

Please check here if you are an exhibitor.

Mr.  Ms.  Dr. First Name \_\_\_\_\_ Last Name \_\_\_\_\_  
 Nickname for Badge \_\_\_\_\_ Job Title \_\_\_\_\_  
 Organization Name \_\_\_\_\_  
 Organization Address \_\_\_\_\_  
 City State/Province \_\_\_\_\_ Country \_\_\_\_\_ ZIP/Postal Code \_\_\_\_\_  
 Telephone \_\_\_\_\_ Fax \_\_\_\_\_ E-Mail \_\_\_\_\_  
 Full Name of accompanying person/guest (if attending)  Mr.  Ms.  Dr. \_\_\_\_\_

**PLEASE TELL US ABOUT YOURSELF**

<b>Your ITS Purchasing Role:</b>	<b>Organization Type:</b>	<b>Gender:</b>	<b>Position:</b>	<b>Check here if applicable:</b>
<input type="checkbox"/> Final Decision Maker	<input type="checkbox"/> Academic Institution	<input type="checkbox"/> Male	<input type="checkbox"/> Owner/Director	<input type="checkbox"/> Disabled and require special services (attach written description of needs)
<input type="checkbox"/> Significant Recommendation	<input type="checkbox"/> Engineering Firm	<input type="checkbox"/> Female	<input type="checkbox"/> Technical Staff Worker	<input type="checkbox"/> Special dietary requirements
<input type="checkbox"/> Identify Need	<input type="checkbox"/> Service Provider	<b>Age:</b>	<input type="checkbox"/> Head of Department	_____
<input type="checkbox"/> None	<input type="checkbox"/> Auto-Consumer Electronics	<input type="checkbox"/> Less than 25	<input type="checkbox"/> Consultant/Advisor	_____
<input type="checkbox"/> Not Applicable	<input type="checkbox"/> Government Agency	<input type="checkbox"/> 25-34	<input type="checkbox"/> Technical Manager	_____
	( <input type="checkbox"/> Federal <input type="checkbox"/> State <input type="checkbox"/> Local)	<input type="checkbox"/> 35-44	<input type="checkbox"/> Staff Member	_____
	<input type="checkbox"/> Consulting Firm	<input type="checkbox"/> 45-54	<input type="checkbox"/> Marketing/Sales Manager	_____
	<input type="checkbox"/> Manufacturer	<input type="checkbox"/> 55-64	<input type="checkbox"/> Other (Please specify):	_____
	<input type="checkbox"/> Other	<input type="checkbox"/> 65 and over	_____	_____

**PART II: REGISTRATION PACKAGES**

	*PUBLIC SECTOR	PRIVATE SECTOR	STUDENT (FULL-TIME)
<b>3 DAY</b>			
<b>Through Feb. 15</b>	<input type="checkbox"/> \$500	<b>Member</b> <input type="checkbox"/> \$800	<b>Non-Member</b> <input type="checkbox"/> \$1,050
<b>Feb. 16 - March 15</b>	<input type="checkbox"/> \$600	<input type="checkbox"/> \$900	<input type="checkbox"/> \$1,150
<b>March 16 - Onsite</b>	<input type="checkbox"/> \$700	<input type="checkbox"/> \$1,100	<input type="checkbox"/> \$1,300
<b>1 DAY</b>			
<b>Through Feb. 15</b>	<input type="checkbox"/> \$300 ( <input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W)	<input type="checkbox"/> \$450 ( <input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W)	<input type="checkbox"/> \$675 ( <input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W)
<b>Feb. 16 - March 15</b>	<input type="checkbox"/> \$350 ( <input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W)	<input type="checkbox"/> \$550 ( <input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W)	<input type="checkbox"/> \$775 ( <input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W)
<b>March 16 - Onsite</b>	<input type="checkbox"/> \$400 ( <input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W)	<input type="checkbox"/> \$625 ( <input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W)	<input type="checkbox"/> \$850 ( <input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W)
<b>Speaker</b>	<input type="checkbox"/> \$300	<input type="checkbox"/> \$550	<input type="checkbox"/> \$650
<b>Host (Full 3 day)</b>	<input type="checkbox"/> \$300		
<b>Expo Only</b>	<input type="checkbox"/> \$75	<input type="checkbox"/> \$150	<input type="checkbox"/> \$250

\* Contractors and consultants are not eligible for the public sector rates.

## PART II: REGISTRATION PACKAGES (CONTINUED)

### ACCOMPANYING PERSON REGISTRATION PACKAGE

An accompanying person can register for \$125.00

### COMPLIMENTARY REGISTRATION PACKAGES

Legislators and Staff     Press

## PART III: TECHNICAL TOURS

Tours			Number of Tickets
<input type="checkbox"/> TDOT Region 3 Traffic Management Center Tour	Mon., April 22	1:00 p.m. – 3:30 p.m.	_____ @ \$50.00
<input type="checkbox"/> Nashville Metropolitan Transit Authority (MTA) Tour	Tues., April 23	9:00 a.m. – 11:30 a.m.	_____ @ \$50.00
<input type="checkbox"/> Nissan Plant Tour	Tues., April 23	11:45 a.m. – 3:30 p.m.	_____ @ \$90.00

## PART IV: WORKSHOPS AND MEETINGS

Workshops and Meetings				Number of Tickets
<input type="checkbox"/> USDOT's Connected Vehicle Safety Pilot Model Deployment Workshop	Sun., April 21	12:30 p.m. – 3:30 p.m.		_____ @ \$40.00
<input type="checkbox"/> State Chapter Strengthening Workshop	Mon., April 22	11:30 a.m. – 2:00 p.m.		_____ @ no fee
<input type="checkbox"/> Networking Reception and Show at Grand Ole Opry	Tues., April 23	5:45 p.m.		_____ @ \$60.00
<input type="checkbox"/> Mileage-Based User Fees (MBUF) Technology Symposium	Wed., April 24	7:30 a.m. – 4:30 p.m.	Speaker _____	@ \$120.00
			Attendee _____	@ \$135.00
			Attendee Onsite _____	@ \$160.00

## PART V: FHWA TRAINING COURSES

FHWA Training Courses			Number of Tickets
<input type="checkbox"/> Training Session 1: Two Part 90 Minute Sessions	Tues., April 23	9:00 a.m. – Noon	_____ @ no fee
<input type="checkbox"/> Training Session 2: Introduction to ICM Deployment	Wed., April 24	1:30 p.m. – 5:30 p.m.	_____ @ no fee
<input type="checkbox"/> Training Session 3: Operations Performance Measures	Wed., April 24	1:30 p.m. – 5:30 p.m.	_____ @ no fee

## PART VI: PAYMENT INFORMATION

**Registration cannot be processed without full payment.** Fees must be paid in U.S. funds drawn on U.S. bank or by international money order. If payment is made from outside the U.S., the registrant must bear all bank charges. The Meeting Registrar reserves the right to charge the actual amount indicated by the registration choices and actual deadlines met. Registration confirmation will indicate the correct amount charged, if different from the total indicated to the right.

Part II: Registration Package	\$ _____
Part III: Tours	\$ _____
Part IV: Workshops and Meetings	\$ _____
<b>TOTAL FEES</b>	<b>\$ _____</b>

### PAYMENT INFORMATION

Check (payable to "ITS America")     MasterCard     VISA     American Express     Purchase Order # \_\_\_\_\_     Bank Transfer\*  
 (\*see instructions below)

Card Number \_\_\_\_\_ Exp. Date \_\_\_\_\_

Billing Address \_\_\_\_\_

Print Name \_\_\_\_\_

Signature (required for processing) \_\_\_\_\_

I understand that my credit card will be charged as soon as this registration form is processed. This is to certify that I hereby accept your registration policies.

### HOW TO REGISTER

**Online:** [www.itsa.org/annualmeeting](http://www.itsa.org/annualmeeting)

**By mail:** ITS America 2013  
 c/o Experient  
 P.O. Box 4088  
 Frederick, MD 21705

**By fax:** 301.694.5124

**Questions:** Contact ITSA Registration Customer Service at 866.229.3691 or 301.694.5243

### MEETING REGISTRATION CREDENTIALS

Meeting credentials will be mailed for registrations received on or before March 25, 2013. Pre-registered international attendees will NOT be mailed their credentials. They will need to pick up their meeting credentials on site at the pre-registration desk at the Gaylord Opryland Convention Center.

### \*BANK TRANSFER INSTRUCTIONS

When sending the wire transfer, *please use the registrant's last name as a reference. Any transfer fees charged by the bank are not covered in the registration rate. Registrants are responsible for paying their bank transfer fees.*

**Bank:** Bank of America, McLean, Virginia, USA  
**Account Name:** ITS America 2013 Annual Meeting  
**Account Number:** 136000132  
**Routing Number:** 255071981  
**Swift Code:** HIBKUS44