

REGISTRATION FORM February 22 - February 23, 2021 - Virtual Event

PLEASE NOTE: Use this form for your "Company" registration which will cover up to the authorized number of event registrations. APTS will confirm your Company registration and include a Coupon Code to send to your individual registrants, along with a link for your attendees to register individually.

Company Registration Information (Please type or print clearly.)					
Station/Company:					
Address:					
City/State/Zip:					
Company Contact:					
Phone:	Email	:			
APTS Member Station, Associate Member, National Organization (Fee includes 10 individual registrations) Additional 10 individual registrations (Fee includes an additional 10 registrations)				This 1/15 2 905 This 1/15 2 405	1/16 - 2/18 □ \$1,095 1/16 - 2/18 □ \$495
Background Informat APTS Member Station		ociate Member □ N	ational Public Me	edia Organization	☐ Summit Supporter
Payment Information					
Registration Fee Amou	nt Due: \$				
Method of Payment: Name on Card:		☐ MasterCard	□ Visa	☐ Check	
Expiration Date:		CVV:			
Signature of cardholder:	mm/yyyy				
Checks should be mad	e payable to APTS	and must accompany regi	stration form.		
	tions and requests f	or refunds must be emaile		2, 2021 to be elig	ible for a full refund
		Please complete and			

Please complete and return to: Joyce Burgess Schwarz, APTS 1225 S. Clark Street, Suite 1425, Arlington, VA 22202

Phone: 202-654-4211 Fax: 202-654-4236 Email: jschwarz@apts.org