



# International Flexible Packaging & Extrusion Division Conference

April 22-25, 2018  
Charlotte, North Carolina, USA  
Omni Charlotte Hotel



Setting the Pace for Innovation in Flexible Packaging

## 2018 International Flexible Packaging and Extrusion Division Conference

April 22 - 25, 2018  
Omni Charlotte Hotel  
Charlotte, NC, USA

### One Price Registration for Converting Facilities & Brand Owners

Enter your first PAID attendee at \$1595 under "General Information" and list all employees who will attend for no additional charge on the lines provided below (minimum of 3 people). All names must be submitted together, employees must be from the same converting location.

Questions? Kristi Ledbetter at +1-770-209-7319 [kledbetter@tappi.org](mailto:kledbetter@tappi.org)

#### General Information (Please print)

Name \_\_\_\_\_ TAPPI Member # \_\_\_\_\_  
 Preferred name for badge \_\_\_\_\_ Job title \_\_\_\_\_  
 Company Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State/Prov \_\_\_\_\_ Postal Code \_\_\_\_\_ Country \_\_\_\_\_  
 Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_

#### Method of Payment (All fees must be paid in U.S. Dollars and must accompany registration forms)

Checks: Enclosed is check number \_\_\_\_\_ for the full amount of \$ \_\_\_\_\_  
 (Make checks payable to TAPPI, check must be in US dollars).  
 Please mail checks to TAPPI, 15 Technology Parkway South, Suite 115, Peachtree Corners, GA 30092

Wire Transfer: \$ \_\_\_\_\_ was wired as payment on \_\_\_\_\_ (date)

Credit Card: Please bill my credit card:  Amex  Discover  MasterCard  Visa

Credit Card # \_\_\_\_\_ Exp \_\_\_\_\_

Signature \_\_\_\_\_

#### Attendees (Please print)

Name \_\_\_\_\_ Preferred name for badge \_\_\_\_\_  
 Job title \_\_\_\_\_  
 Email address \_\_\_\_\_ Phone \_\_\_\_\_

I will attend the NASCAR Hall of Fame evening event on Tuesday, April 24<sup>th</sup> (1<sup>st</sup> paid attendee included) Yes \_\_\_\_\_ No \_\_\_\_\_



# International Flexible Packaging & Extrusion Division Conference

April 22-25, 2018  
Charlotte, North Carolina, USA  
Omni Charlotte Hotel



Setting the Pace for Innovation in Flexible Packaging

This form should be returned to *Kristi Ledbetter* by *April 13<sup>th</sup>*.

**Attendees** (Please print – make additional copies of this form as needed.)

Name \_\_\_\_\_ Preferred name for badge \_\_\_\_\_

Job title \_\_\_\_\_

Email address \_\_\_\_\_ Phone \_\_\_\_\_

I will attend the NASCAR Hall of Fame evening event on Tuesday, April 24<sup>th</sup> (\$100 charge) Yes \_\_\_\_\_ No \_\_\_\_\_

Name \_\_\_\_\_ Preferred name for badge \_\_\_\_\_

Job title \_\_\_\_\_

Email address \_\_\_\_\_ Phone \_\_\_\_\_

I will attend the NASCAR Hall of Fame evening event on Tuesday, April 24<sup>th</sup> (\$100 charge) Yes \_\_\_\_\_ No \_\_\_\_\_

This form may be e-mailed to *Kristi Ledbetter* at [kledbetter@tappi.org](mailto:kledbetter@tappi.org) or

**FAX this form to TAPPI at 770-446-6947**

If you prefer to mail the form with a check please mark it to the attention of Kristi Ledbetter. TAPPI, 15 Technology Parkway South, Suite 115, Peachtree Corners, GA 30092 USA

### Avis Rent A Car

TAPPI has arranged for special car rental discounts through **Avis**. To check rates and to reserve a vehicle, please call 1-800-331-1600 and refer to Worldwide Discount Number U226699.

### Cancellation Policy

If you find that you have to cancel, your full registration fee will be refunded if TAPPI's Registration Department receives written or faxed (+1-770 446-6947) notification by March 23, 2017. Please note: there will be a 50% refund for all written cancellations made after March 23, 2017 but no later than April 13, 2017 which is five business days prior to the start of the conference. Understandably, after this time, no refunds can be issued. Substitutions, however, will be accepted at any time without penalty. In the event that the conference is cancelled, TAPPI will refund all registration fees. TAPPI's liability is limited solely to the refund of the registration fee.

The contact information you provide may be used by TAPPI or its business associates to notify you of items that may be of interest to you.

I understand that under certain laws and regulations, TAPPI must have my written permission in order to communicate with me via fax or email. I hereby give TAPPI, TAPPI's business associates, the TAPPI Foundation, and TAPPI Local Sections written permission to communicate with me via  fax and/or  email

Signature \_\_\_\_\_ Date \_\_\_\_\_