

# MD Tourism & Travel Summit

## Live! Casino & Hotel

### Registration Fees

	MEMBER	NON-MEMBER
Full Conference (first attendee)	___\$425.00	___\$525.00
Full Conference 2021 & MTC Membership '22 Bundle	___\$650.00	(Standard Memberships. DMO's & Associations, contact Ruth for paper registration for you)
Full Conference 2021 & MTC Membership '22 Bundle	___\$750.00	(for DMO/Association Memberships budgets under \$500K)
Full Conference 2021 & MTC Membership '22 Bundle	___\$900.00	(for DMO/Association Memberships budgets over \$500K)
One Day Fee (Does not included Awards Banquet)	___\$225.00	___\$300.00 Which Day___Wed___Thurs___Fri
Full Conference (additional attendees)	___\$325.00	___\$495.00

**Primary Attendee and Title** \_\_\_\_\_

Email \_\_\_\_\_

Contact person and title (if different from Primary attendee) \_\_\_\_\_

Print Organization's Company name as it should be listed on your badge

Organization Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

**Additional Attendee and Title** \_\_\_\_\_

Email \_\_\_\_\_

**Additional Attendee and Title** \_\_\_\_\_

Email \_\_\_\_\_

**Additional Attendee and Title** \_\_\_\_\_

Email \_\_\_\_\_

Questions:

Is this your first time attending the Summit? \_\_\_\_\_ Yes \_\_\_\_\_ No

I have the following special dietary or accessibility needs.

**Send Payment with this Agreement to:** Maryland Tourism Coalition, 626 C Admiral Dr, #311, Annapolis, MD 21401

Check Enclosed for \$ \_\_\_\_\_. Checks made payable to MTC

Credit Card Number \_\_\_\_\_ Exp date \_\_\_\_\_ Security Code \_\_\_\_\_

Name on Card \_\_\_\_\_

Billing address \_\_\_\_\_