



# STRIVE FOR SUSTAINABILITY

SOLID WASTE & RECYCLING CONFERENCE WITH TRADE SHOW

**MAY**  
**19-22, 2019**

**1. Save money if you register by April 15, 2019**

Mr.  Mrs.  Ms. [PLEASE PRINT LEGIBLY or TAPE A BUSINESS CARD HERE.]

Name \_\_\_\_\_

Title \_\_\_\_\_ Organization \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Tel \_\_\_\_\_ Fax \_\_\_\_\_ E-Mail \_\_\_\_\_

**2. Please  if you are a member**

NYSASWM  NYSAR3  SWANA Member ID: \_\_\_\_\_ (If unsure of membership, call Mallory Cail (518) 339-1272.)

**3. Registration fee**

	On or Before April 15, 2019	After April 15, 2019
Member	\$450	\$500
Non-Member	\$500	\$550
Voluntary Carbon Offset (Conference Travel)	\$3	\$3
Spouse with Verification (Full Conference Meals)	\$255	\$280
1 Day Registration <input type="checkbox"/> SU <input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W	\$285	\$310
Speaker	\$315	\$335
Tuesday P.M. Golf Tournament	\$120	\$130
Tuesday P.M. Fishing	\$80	\$95
Tuesday P.M. Adirondack Hike	\$40	\$50
Tuesday P.M. Culinary Demo	\$40	\$50
Tuesday P.M. Horseback Riding	\$40	\$50
Tuesday P.M. Kayaking Tour	\$40	\$50
Tuesday P.M. Tennis	FREE	FREE
<b>TOTAL DUE</b>		

**4. Select a method of payment - Signature Required**

- CHECK: Make payable to SWANA, NYS (drawn on a U.S. bank, in U.S. dollars)
- CREDIT CARD: I authorize SWANA, NYS to charge my: VISA | MasterCard | AMEX

Name exactly as it appears on credit card \_\_\_\_\_

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

Signature Required \_\_\_\_\_

**Refund & Cancellation Policy:**

- Refunds ONLY IF WRITTEN, cancellation received by May 3, 2019. No phone cancellations.
- Substitutions may always be made.
- We invoice for no-shows!

**Registration Fee:**

- Includes all sessions, trade show/open house, continental breakfasts, refreshments, lunches and cocktail reception.
- Registration is "complete" upon payment.
- There will be a \$25 charge for returned checks.

**5. Please help us plan better for you! (  appropriate box)**

- Vegetarian or other \_\_\_\_\_ lunch
- Monday Lunch  ADA Request \_\_\_\_\_
- Tuesday Lunch
- Wednesday Lunch
- I can help with \_\_\_\_\_

**6. Send completed conference registration form to:**

**By Mail:** Mallory Cail  
9 Otter Creek Road  
Johnsonville, New York 12094

**Questions:** Mallory Cail (518) 339-1272  
email: register@nyfederation.org

**ACKNOWLEDGEMENT**

**Photograph Policy:** The Federation of NY Solid Waste Association retains the right to use any and all photographs taken at such events for marketing purposes. These photographs may appear without compensation in newspapers, productions, publications, Web, or other printed or electronic materials related to the role and function of marketing the Federation of New York Solid Waste Associations, or its affiliates. Persons who do not wish their photograph to be used should provide written notification to aschmidt@dunn-pc.com.

**Liability Release, Claims Waiver, and Indemnification Agreement (hereafter collectively "Agreement"):** In consideration for services of the Federation of New York Solid Waste Associations and its Affiliates (New York State Association for Solid Waste Management, New York State Association for Reduction, Reuse & Recycling and Solid Waste Association of North America, New York State Chapter), its agents, officers, volunteers, participants, employees and all other persons or entities acting in any capacity on their behalf (hereinafter collectively "NY Federation"), I, on behalf, of myself, heirs, assigns and my estate, hereby agree to release and discharge the NY Federation as follows: a.) agree to indemnify, and hold harmless the NY Federation from any and all claims, demands, or causes of action in any way connected with my participation in the conference, both on and off premises, including any claims with alleged negligent acts; and b.) agree to pay for any fees and costs should the NY Federation, or anyone acting on its behalf, be required to incur attorney's fees and costs to enforce this Agreement. I acknowledge for this Agreement: a.) no impediments or reasons why I would lack the capacity to enter into; b.) read and understood it; and 3.) be unconditionally bound by its terms.

**By payment and/or signing this Registration Form, I, or my designee completing, acknowledge that I have read and accepted the Payment, Refund & Cancellation, Photograph and Liability Release, Claims Waiver and Indemnification Agreement on this form. Further, I understand that if I fail to appear that I, or my company/organization, will be responsible for the total charges due.**

X \_\_\_\_\_  
Signature Required