



2019 Region VII VPPPA Registration Policies and Procedures

Website for the event:

<http://www.regionviivpp.org/>

Date(s) of conference events: May 20 -22, 2019

Official 1st day of conference: May 20, 2019

Official conclusion of conference: May 22, 2019

Pre-Conference Workshops/Activities:

- VPP Application Workshop, 5/20/19
- Strengthening Star Quality (SSQ) Workshop, 5/20/19
- Scholarship Bowling Event, 5/21/19 at The Alley, Wichita, KS, <https://www.thealleywichita.com>

Event Location:

Hyatt Regency Wichita
400 W. Waterman
Wichita, KS 67202

Website: https://www.hyatt.com/en-US/hotel/kansas/hyatt-regency-wichita/wicrw?mckv=J9rhRfdz_pdv_c_pcrd_79164883_217041_pmt_be_pkw_wichita%20hyatt_slid_pgrid_3_913061734_ptaid_kwd-21041406267:loc-190&src=adm_sem_agm_pfx_crp_ppc_md_D+Brand-Wichita-NonGP_bing_Brand-Wichita-General-Exact_be_wichita%20hyatt_Brand

Other Hotel Information

Hotel Room Rate: \$129
Discount Code: Voluntary Protection Program Participants' Association
Government Rate: Check with hotel for latest rate
Direct Reservations #: 316-293-1234
Toll Free Reservations #: 800-233-1234

Reservation Link: https://www.hyatt.com/en-US/hotel/kansas/hyatt-regency-wichita/wicrw?mckv=J9rhRfdz_pdv_c_pcrd_79164883_217041_pmt_be_pkw_wichita%20hyatt_slid_pgrid_3_913061734_ptaid_kwd-21041406267:loc-190&src=adm_sem_agm_pfx_crp_ppc_md_D+Brand-Wichita-NonGP_bing_Brand-Wichita-General-Exact_be_wichita%20hyatt_Brand
Reservation Deadline: 4/26/19

Registration Policy: The pre-registration deadline is May 6, 2019. After this date, attendees are invited to register onsite.

Substitution Policy: Substitutions are accepted.

Cancellation Policy: Cancellations request must be received by April 26, 2019 and a \$50.00 processing fee will be charged per registrant. Requests received after this date will be denied. Cancellations may be processed post-conference within 30 business days.

No-Shows: Refunds are not granted for no-shows.

Electronic Recording Policy: No audio or video recording is permitted.

Conference Questions/Special Assistance:

Primary Conference Contact:
Bill Turner
Phone: (316) 200-9100
Email: bill.turner@nustarenergy.com

Secondary Conference Contact(s):
Cody Patton
Phone: (731) 694 - 2781
Email: cody.patton@bayer.com

Primary Exhibit Sales Contact:
Brent Nelson
Phone: (308) 627-5292
Email: brent.d.nelson@monsanto.com

Secondary Exhibit Sales Contact(s):
Dan Saathoff
Phone: (308) 222 - 0078
Email: dansaathoff@gmail.com

Questions Regarding Registration: Contact VPPPA at (703) 761-1146 or Registration@vpppa.org.

Liability Waiver: By submitting this registration form, the registrant releases any photographs that may be incidentally taken of them by the region during these events to be used for any purpose.

Indemnification: Event attendees and guests, to the extent permitted by law, agree to indemnify VPPPA and its officers, directors, agents, and employees, of and from all claims, demands, or suits for personal injury or property damage, including costs and attorney fees, in any way arising out of or related to third party claims based on indemnifying party's negligent acts or omissions in connection with this event.

Code of Conduct: VPPPA is dedicated to providing a harassment-free experience for everyone and does not tolerate harassment of symposium participants in any form. Please review the full code of conduct on the Region VII event details page at <https://www.vpppa.org/education/calendar/event-details?eventID=5442>.



2019 Region VII VPPPA Conference
May 20 - 22, 2019
Hyatt Regency Wichita
Wichita, KS



Please complete the registration form including signature and payment information. Use one registration form per person. This form may be copied for additional registrations. Registrations will not be processed without full payment and registrant's full name. See Registration Policies and Procedures for more information. VPPPA Tax ID# 54-1598954. *Please write legibly.*

This area for VPPPA Office Use:

Check the appropriate Fee Category. Please refer to the Registration Policies and Procedures on the previous page for registration type definitions.

Conference Registration Types	Early	Regular	Late/Onsite
	By 4/12/19	By 5/10/19	After 5/10/19
	Member / Nonmember	Member / Nonmember	Member / Nonmember
<input type="checkbox"/> Conference Registration	\$375.00 / \$400.00	\$425.00 / \$475.00	\$475.00 / \$525.00
<input type="checkbox"/> Speaker	\$300.00	\$300.00	\$300.00
<input type="checkbox"/> 1-Day ONLY SPEAKER Conference Registration	\$150.00	\$150.00	\$150.00
Select Day: <input type="checkbox"/> Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday			
<input type="checkbox"/> BOD Member/DOD/DOE/OSHA/Student	\$150.00	\$150.00	\$150.00
<input type="checkbox"/> 1-Day ONLY Conference Registration	\$225.00	\$250.00	\$275.00
Select Day: <input type="checkbox"/> Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday			
<input type="checkbox"/> Closing Luncheon Only	\$50.00	\$50.00	\$75.00
 Pre-Conference Workshop(s)/Events			
<input type="checkbox"/> Region VII Scholarship Bowling Event, Monday, May 20	\$75.00	\$75.00	\$75.00
<input type="checkbox"/> VPP Application Workshop Monday, May 20	\$200.00	\$225.00	\$250.00
<input type="checkbox"/> Strengthening Star Quality Workshop Monday, May 20	\$125.00	\$125.00	\$125.00
<input type="checkbox"/> Closing Luncheon Tickets X ____ (total needed) Monday, May 22	\$50.00 each	\$50.00 each	\$75.00 each

***Indicates required fields.**

* YES, I am a VPPPA Member. 6-digit membership number* _____ NO, I am not a VPPPA Member.

Please indicate if your site participates in one of these programs: VPP SHARP

Attendee Contact Information

Prefix* Dr. Miss. Mr. Mrs. Ms. Rev. The Honorable

First Name* _____ Middle Initial _____

Last Name* _____ Suffix _____

Designation(s): (i.e. CSP, OHST) _____

Badge Nickname _____

Job Title* _____

Do you as an individual belong to any recognized bargaining units?*

Yes No If you would like them to appear on your badge, please list:

Company/Org* _____
No acronyms, use proper name

Address* _____

City* _____ State* _____ Zip* _____

Phone* _____

Email* _____
Only registrants who provide an email address will receive confirmation of their registration.

Additional Email _____
If you would like a receipt to be sent to someone other than the attendee, provide an additional email

Method of Payment

Total Payment \$ _____

Check enclosed: Check # _____
(payable to VPPPA, Inc.)

Visa MC AMEX Discovery

Card # _____

Exp Date _____

Cardholder's Name _____
(exactly as it appears on card)

Signature _____

Liability Waiver: By submitting this registration form, the registrant releases any photographs or videos that may be incidentally taken of them by VPPPA during these events to be used for any purpose.

Please return your form with payment:

Credit Card & Check Payments: for cards, fax to (703) 761-1148; For checks/cards, mail to VPPPA, Inc., 7600-E Leesburg Pike, Suite 100, Falls Church, VA 22043-2004.

Conference Questions/Special Assistance: Visit the Region VII Page at <http://www.regionviivpp.org/>.

Registration Questions: Contact VPPPA at (703) 761-1146 or Registration@vpppa.org.