

Your Name: _____ Email Address: _____
 Organization: _____ Phone Number: _____
 Address: _____ City: _____
 State/Location: _____ Zip/Postal Code: _____
 Emergency Contact: _____ Emergency Number: _____

What's your primary industry?

Bare Root	Wholesaler Grower
Broker	Cut Flowers
Cells & Plugs	Florist
Container	Mail Order
Retail Grower	Garden Center
Seed Wholesale	Breeder
Public Garden	University/Education

Age: 19 & Under | 20-29 | 30-39 | 40-49 | 50-59 | 60-69 | 70+ Dietary restrictions: Gluten Free | Vegetarian / Vegan

CORE SYMPOSIUM (select **one** of the following):

National Symposium Event	Dates	Member Registration Early Bird (6/21/19)	Member Registration	Non-Member Registration Early Bird (6/21/19)	Non-Member Registration
*Core Symposium	7/30 - 8/1 Tuesday, Wednesday & Thursday	<input type="checkbox"/> \$539	<input type="checkbox"/> \$589	<input type="checkbox"/> \$809	<input type="checkbox"/> \$859
AAS/NGB Two-Day Registration	7/30 - 7/31 Tuesday & Wednesday	<input type="checkbox"/> \$395	<input type="checkbox"/> \$445	<input type="checkbox"/> \$665	<input type="checkbox"/> \$715
Student Rate Core Symposium <i>(Full Time Student)</i>	7/30 - 8/1 Tuesday, Wednesday & Thursday	<input type="checkbox"/> \$300	<input type="checkbox"/> \$350	<input type="checkbox"/> \$300	<input type="checkbox"/> \$350

For Core Symposium & Wednesday Attendees, please select your tour & bus preferences:

Select Wednesday Tour:

- Taste of Chicago Grower Tour** Depart 7:00 AM
- Chicago Gardens with Purpose Tour** Depart 7:30 AM
- Chicago Botanic Garden & City Tour** Depart 8:00 AM *(All AAS/NGB Attendees should register this tour)*

Select Wednesday Return:

- I will return on the early bus**, leaving Millennium Park at 8:00 PM
- I will return on the late bus**, leaving Millennium Park at 10:00 PM

For full details, visit www.perennialplant.org

**Additional Tour & Registration Options
and Payment on back...**

Additional Tour & Registration Options:

(AAS/NGB Attendees should register for Tour Option 1)

National Symposium Event	Dates	Member Registration Early Bird (6/21/19)	Member Registration	Non-Member Registration Early Bird (6/21/19)	Non-Member Registration
Wisconsin Wonders Tour	7/28: Sunday	<input type="checkbox"/> \$219	<input type="checkbox"/> \$269	<input type="checkbox"/> \$329	<input type="checkbox"/> \$379
Prairie State Tour	7/28: Sunday	<input type="checkbox"/> \$149	<input type="checkbox"/> \$199	<input type="checkbox"/> \$229	<input type="checkbox"/> \$279
North Shore Design Tour	7/29: Monday	<input type="checkbox"/> \$149	<input type="checkbox"/> \$199	<input type="checkbox"/> \$229	<input type="checkbox"/> \$279
West Design & Retail Tour	7/29: Monday	<input type="checkbox"/> \$149	<input type="checkbox"/> \$199	<input type="checkbox"/> \$229	<input type="checkbox"/> \$279
Pre-Conference Talks	7/29: Monday	<input type="checkbox"/> \$199	<input type="checkbox"/> \$249	<input type="checkbox"/> \$199	<input type="checkbox"/> \$249
Tuesday Only	7/30: Tuesday	<input type="checkbox"/> \$209	<input type="checkbox"/> \$259	<input type="checkbox"/> \$319	<input type="checkbox"/> \$369
*Wednesday Only	7/31: Wednesday	<input type="checkbox"/> \$249	<input type="checkbox"/> \$299	<input type="checkbox"/> \$369	<input type="checkbox"/> \$419
*Thursday Only	8/1: Thursday	<input type="checkbox"/> \$209	<input type="checkbox"/> \$259	<input type="checkbox"/> \$319	<input type="checkbox"/> \$369
Michigan Marvels Tour	8/2: Friday	<input type="checkbox"/> \$219	<input type="checkbox"/> \$269	<input type="checkbox"/> \$329	<input type="checkbox"/> \$379
South by Southwest Design Tour	8/2: Friday	<input type="checkbox"/> \$149	<input type="checkbox"/> \$199	<input type="checkbox"/> \$229	<input type="checkbox"/> \$279

*Please note, you must be registered for the day in order to attend dinner. Tickets will be required for access to dinners and receptions.

Wednesday Only - see front to select bus tour option.

PAYMENT INFORMATION:

- VISA
 MASTER CARD
 DISCOVER
 AMERICAN EXPRESS

Card #: _____

Name on Card: _____

Signature: _____

Total: \$

CVV: _____

Expiration: _____

Fax credit card information to: 888.440.3122

Mail credit card information to: P.O. Box: 6652 Raleigh, NC 27628