## **EATDSHOW**

## **REGISTRATION & HOUSING FORM**



Registration Deadline (mail): January 31, 2024 Housing Deadline: January 11, 2024

Cancellation Deadline: Registration: December 22, 2023 | Housing: January 11, 2024 by 5pm ET

Registration cancellations must be received in writing no later than December 22, 2023 to receive a refund (minus a \$50 processing fee per individual registration). To cancel your registration/hotel reservation, email your written request to nada@maritz.com. If you have any questions, call 864.208.8439 or email nada@maritz.com. We cannot accept registrations or hotel reservations over the phone.

PREFIX	FIRST NAME	INITIAL	LAST NAME	SUFFIX
PREFIX	SPOUSE/RELATIVE FIRST NAME	INITIAL	LAST NAME	
BADGE NA	ME	SPOUSE/	RELATIVE BADGE NA	ME
COMPANY	NAME			
ADDRESS				
CITY		STATE	ZIP	COUNTRY
BUSINESS	PHONE		MOBILE PHONE [	☐ I consent to receive autodialed and/or pre-recorded messages from or behalf of the National Automobile Dealers Association. Consent is not a condition of purchase.
ATTENDEE	EMAIL ADDRESS		CC EMAIL ADDRES	S
(NADA doe	es not share email or phone information wit	h outside partie	s.)	

	EARLY (by Sept. 8)	ADVANCE (Sept. 9-Jan. 31)	ON-SITE
ATD MEMBERS			
☐ Dealer (DLR)	\$600	\$700	\$800
☐ Dealership Manager (MGR)	\$600	\$700	\$800
NON-MEMBER			
☐ Dealer (DLR)	\$825	\$925	\$1,025
Dealership Manager (MGR)	\$825	\$925	\$1,025
<b>GUEST</b> (must be accompanied by a registered dealer or manager)			
☐ Guest (of a Dealer, Manager, or International Affiliate)	\$600	\$700	\$800
☐ Guest (of Non-member)	\$825	\$925	\$1,025
ALLIED INDUSTRY			
☐ Allied Industry with Education (ALLW)	\$1,050	\$1,200	\$1,350
NADA WELCOME RECEPTION			
Welcome Reception Ticket is included for Member Dealers/Managers, (	Guest of Dealer/Manager &	Allied Industry.	
☐ Allied Industry, Non-member Dealer/Manager, Guest (of Non-member)	\$250	\$250	\$250
WOMEN DRIVING AUTO RETAIL LUNCHEON			
☐ Member/Non-member Dealer/Manager (limit 1)	\$150	\$150	\$150
TOTAL REGISTRATION FEES			
Your registration includes access to Canaral Sessions Make Meetings	Education Connection Hub	and ATD Walcome Recent	ion and access to

Your registration includes access to: General Sessions, Make Meetings, Education, Connection Hub, and ATD Welcome Reception and access to NADA Show events.

HOTEL PREFERENCE — Please select a minimum of three (3) different hotel
Arrival Date
Departure Date
1st Choice
2nd Choice
3rd Choice
4th Choice

Special Room Requests will be forwarded to the hotel. Special requests are **not** guaranteed. Please reconfirm your special request upon check-in at the hotel.

One night's room and tax will January, 2024.	be charged by the hotel in
Room Type	Special Requests
☐ SINGLE (1 person, 1 bed)	☐ KING BED
☐ DOUBLE (2 people, 1 bed)	☐ TWO BEDS
☐ DBL/DBL (2 people, 2 beds)	☐ NON-SMOKING
☐ TRIPLE	☐ SMOKING
□ QUAD	☐ HANDICAP ACCESSIBLE
☐ 1 BEDROOM SUITE	
☐ 2 BEDROOM SUITE	

F	Please	check	here	if you	require	special	service	es

Web show.atd.org
Phone 864.208.8439
Mail (for check payments)
NADA Registration and Housing
Attn: Accounting Dept.
8484 Westpark Dr.
Suite 500
Tyson, VA 22102

Tyson, VA 22102
Franchises Sold
1
2
3
4
Which of the following BEST describes your job title/function?  A. Dealer/Principal  B. General Manager  C. CFO, Controller  D. Internet Manager  E. New Vehicle Manager  F. Pre-Owned Vehicle Manager  G. Fixed Ops Director  H. Service Manager  I. Parts Manager
☐ J. Allied Industry Affiliate
What is your age?*  □ A. <24 □ B. 25-34  □ C. 35-44 □ D. 45-54  □ E. 55-64 □ F. >65
Please provide your gender:  ☐ Male ☐ Female ☐ Prefer not to answer
How many rooftops/stores are in your automotive group?  □ 1–3  □ 4–10  □ 11–20  □ 21–30  □ 30+  □ N/A
Which of the following best describes your organization?  A. Individual Dealership B. Chain Dealership C. Publicly Owned Dealership D. Auto Industry Affiliate
Is this your first time joining us at the ATD Show?  ☐ Yes ☐ No
* Age information will be used only for ATD programs and will not be disclosed to any external person, organization or company, except in aggregate form that does not identify any individual.
PAYMENT INFORMATION Forms received without payment will not be processed.
PAY BY CHECK (Make payable to NADA.)
☐ Enclosed for REGISTRATION fees ONLY. Please complete the credit card information below to reserve your hotel.

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PAY BY CREDIT CARD				
□ American Express □ MasterCard □ Visa				
CARD NUMBER				
EXPIRATION DATE (Must be AFTER Jan. 2024)				
CARDHOLDER'S NAME				

CARDHOLDER'S SIGNATURE