

# EDGE 2023 GROUP REGISTRATION FORM

October 1-4



CSCMP is pleased to offer special rates to groups of five or more attending EDGE 2023. Choose from one of the options below, or contact us at [corporate@cscmp.org](mailto:corporate@cscmp.org) or +1 630.645.3479 to discuss a custom option to meet your needs.

<input type="checkbox"/> <b>OPTION 1</b> <b>Non-Member Rate</b>	<input type="checkbox"/> <b>OPTION 2</b> <b>Corporate Member* Rate</b>	<input type="checkbox"/> <b>OPTION 3</b> <b>Group Rate</b>
5 Registrations ONLY <b>Full (in-person) Experience</b> <b>\$12,475</b>  <ul style="list-style-type: none"> <li>Membership not included</li> <li>Additional registrations available               <ul style="list-style-type: none"> <li>\$2,495 per person – Full (In-person) Experience</li> </ul> </li> </ul>	5 Registrations (Includes Memberships) <b>Full (in-person) Experience</b> <b>\$9,475</b>  Additional Benefits include: <ul style="list-style-type: none"> <li>5 Annual Memberships included</li> <li>Preferred pricing on additional benefits</li> <li>Add Registrations for just \$1,595 each</li> <li>Memberships and registrations are transferrable</li> <li>Added company visibility</li> </ul> <i>*Customized corporate membership packages available upon request.</i> <b>SAVE over 20%</b>	5 Registrations (PLUS Membership)** <b>Full (in-person) Experience</b> <b>\$10,495</b>  <ul style="list-style-type: none"> <li>Additional registrations available               <ul style="list-style-type: none"> <li>\$1,800 per person (plus \$299 membership) – Full (In-person) Experience</li> </ul> </li> </ul> <b>**Membership required:</b> Each attendee must have an active individual membership through the conclusion of EDGE. Membership dues are \$299 per person. <b>SAVE over 10%</b>

## Group Main Contact Information

First/Given Name \_\_\_\_\_ Middle Initial \_\_\_\_\_ Last Name/Surname \_\_\_\_\_ Nickname \_\_\_\_\_  
 Title \_\_\_\_\_ Company \_\_\_\_\_  
 Street Address/PO Box \_\_\_\_\_  
 City \_\_\_\_\_ State/Province \_\_\_\_\_ Zip/Postal Code \_\_\_\_\_ Country \_\_\_\_\_  
 Phone \_\_\_\_\_ E-Mail \_\_\_\_\_ 2<sup>nd</sup> E-Mail \_\_\_\_\_

☐ By providing my e-mail address on this form, I understand that it will be used to complete this transaction and receive electronic communications from CSCMP regarding membership, benefits, and event notifications.

Please provide complete contact information for each individual on page two.

## Payment Information\*

☐ **Check:** Check # \_\_\_\_\_ Amount of Check \$ \_\_\_\_\_

*Please note: Make checks payable to CSCMP in US dollars drawn on a US Federal Reserve System Bank.*

☐ **Credit Card:** ☐ American Express ☐ Discover ☐ MasterCard ☐ Visa

Credit Card Number \_\_\_\_\_

Expiration Date \_\_\_\_\_ Security Code \_\_\_\_\_

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

Billing Address \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_

Zip/Postal Code \_\_\_\_\_ Country \_\_\_\_\_

Signature \_\_\_\_\_

**Group Cancellation Policy:** Group registrations are nonrefundable. All terms and conditions can be found on the EDGE website at [CSCMPEDGE.org/Register](http://CSCMPEDGE.org/Register).

☐ I have read and understand the cancellation policy.

Signature \_\_\_\_\_

### IMPORTANT INFORMATION

- Payment must accompany your registration form. Registration rates do not include hotel or travel.
- CSCMP assesses a \$50 processing fee for any payment that fails to clear the bank.
- Substitution Policy:** Registrant substitutions are only available to corporate member companies. All terms and conditions can be found online at [CSCMPEDGE.org/Register](http://CSCMPEDGE.org/Register)
- By registering and attending CSCMP meetings and other activities, you consent to allow CSCMP to use/distribute (both now and in the future) your image or voice in photographs, videotapes, and audiotapes of such events and activities.

*\*Attendees registering at the member rate must maintain their active CSCMP memberships through the conclusion of the educational event for which they are registered.*

# Group Contact Information

First/Given Name \_\_\_\_\_ Middle Initial \_\_\_\_ Last Name/Surname \_\_\_\_\_ Nickname \_\_\_\_\_  
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# Group Contact Information (cont.)

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