



CONSTRUCTION INSTITUTE SUMMIT 2020

Los Angeles, CA | February 20-22

Registration Form

Please complete the registration form including signature and payment information. Use one registration form per person. Registrations will not be processed without full payment and registrant's full name. By submitting the registration form the individual agrees to all registration policies on the Conference website.

Fax: (866) 902-5593
Phone: (800) 548-2723 (U.S.)
 (703) 295-6300
 (International)
Mail: ASCE/CI Summit 2020
 P.O. Box 79668
 Baltimore, MD 21279-0668

Contact Information (*Indicates required information)

*First Name _____ MI _____ *Last Name _____
 Credentials _____ Badge Nickname _____
 *Company/Organization/University _____
 *Street Address/PO Box _____
 *City _____ *State _____ *Postal Code _____ *Country _____
 *Work Phone _____ Home Phone _____ Cell Phone _____
 Fax _____ *E-mail _____
 ASCE Member Number _____

Join ASCE today and SAVE

Simply visit www.asce.org/join or call (800) 548-2723 to request an application.

Register by December 18, 2020 and Save!

For complete information and to register online, visit www.cisummit.org.

For additional information, please contact Customer Service at registrations@asce.org or dial (800) 548-2723.

Please answer these questions so that we may serve you better (* Indicates required information)

- The organization I work for is: Private Government Education Military Other
- My position is: Partner/Principal Senior Manager Middle Manager Technical/Professional Manager Faculty Student Retiree
- How many previous ASCE Conferences have you attended, including this one? 0 1 2 3 or more
- My age group: Under 25 25-34 35-49 50-65 Over 65

*Check item if you require: Vegetarian Vegan Gluten Free Other _____
 *Check item if you have allergies to the following: Peanuts Tree nuts Seafood Other _____
 *Check item if you require special aids or services: Deaf or Hearing Impaired Blind or Visually Impaired Wheelchair User Other _____

Full Registration

Registration Category	Early-Bird	Advance	On-Site
	By 12/18/2019	By 1/15/2020	After 1/15/2020
ASCE/CI Member	\$620	\$740	\$840
Non-Member	\$775	\$895	\$995
Speaker Member	\$570	\$690	\$790
Speaker Non-Member	\$715	\$835	\$935
ASCE Student Member	\$260	\$310	\$360

ASCE uses the information you provide to administer your registration and to keep you apprised of conference information and related products and services. The name, job title, company information, and mailing address of registrants are also included in the conference attendee list that is provided to sponsors and exhibitors and included in the conference app. For more information, see our [Privacy Policy](#).

Full Registrants

Included in your Full Registration fee are the following events. There is no extra charge for these events. However, each registrant must pre-register below in order to receive a ticket to the event.

Event	Yes, I will attend	No
Welcome Reception, Thursday	Yes, I will attend	No
Plenary Breakfast, Friday	Yes, I will attend	No
Exhibit Hall Lunch, Friday	Yes, I will attend	No
Friday Night Reception	Yes, I will attend	No
Closing Plenary Lunch, Saturday	Yes, I will attend	No

Daily Registration

Please select one day:

Registration Category	Thursday or Saturday			Friday		
	EB By 12/18/2019	ADV By 1/15/2020	ONS After 1/15/2020	EB By 12/18/2019	ADV By 1/15/2020	ONS After 1/15/2020
ASCE/CI Member	\$310	\$385	\$460	\$410	\$485	\$560
Non-Member	\$360	\$435	\$510	\$460	\$535	\$610

Pre-Conference Tour

This event requires an additional fee.

Wednesday, February 19	EB	ADV	ONS
LAX Midfield Satellite Concourse	\$55	\$70	\$85

Additional Tickets

These events are included with Full Registration.

Thursday, February 20	EB	ADV	ONS	QTY
Welcome Reception	\$75	\$95	\$105	___

Friday, February 21

	EB	ADV	ONS	QTY
Plenary Breakfast	\$50	\$60	\$70	___
Exhibit Hall Lunch	\$50	\$60	\$70	___
Friday Night Reception	\$85	\$100	\$115	___

Saturday, February 22

	EB	ADV	ONS	QTY
Closing Plenary Lunch	\$60	\$70	\$80	___

Technical Tour

This event requires an additional fee.

Saturday, February 22	EB	ADV	ONS	QTY (max 2)
L.A. Stadium & Entertainment District at Hollywood Park	\$55	\$70	\$85	___

Payment

Full payment must accompany this registration form. Cancellation fee is \$75 if written cancellation is received by January 15, 2020. NO REFUNDS granted for cancellations after January 15, 2020.

Full Registration	\$ _____
Daily Registration	\$ _____
Additional Tickets	\$ _____
Tour	\$ _____
GRAND TOTAL (pay this amount)	\$ _____

Check payable to ASCE/CI Summit 2020.

Checks must be issued in U.S. dollars, drawn on U.S. banks. To pay registration fee by check, postmark your registration by the deadlines indicated above and mail to:
 ASCE/CI Summit 2020
 P.O. Box 79668
 Baltimore, MD 21279-0668, USA

Purchase Order # _____
 (Provide copy of PO form with your registration.)

Credit Card

AMEX VISA MC DISC DINERS
 Card Number _____
 Expiration Date (MM/YY) _____
 Cardholder Name _____
 Total to be Charged \$ _____
 Signature _____