

# 2021 ON SITE REGISTRATION FORM • GREEN EXPO • USE FOR 1 OR 2 ATTENDEES

USE FOR 1 OR 2 ATTENDEES FROM SAME COMPANY. USE NEW FORM FOR MORE. PRINT CLEARLY.  
 PRINT COMPANY & ATTENDEES BELOW • ADD EMAIL • ADD PESTICIDE LICENSE & BIRTH DATE or N/A • CIRCLE DAYS ATTENDING

**COMPANY** \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ PHONE \_\_\_\_\_

**NAME 1:** \_\_\_\_\_ #1 Email \_\_\_\_\_ TUES • WEDS • THURS

# 1 PESTICIDE LICENSE # (If applicable): \_\_\_\_\_ #1 DATE OF BIRTH (MM-DD-YYYY): \_\_\_\_\_

**NAME 2:** \_\_\_\_\_ #2Email \_\_\_\_\_ TUES • WEDS • THURS

# 2 PESTICIDE LICENSE # (If applicable): \_\_\_\_\_ #2 DATE OF BIRTH (MM-DD-YYYY): \_\_\_\_\_

<b>ATTENDEE REGISTRATION:</b> <i>Membership will be verified.</i> Member of? __NJTA __GCSANJ __SFMANJ __NJLCA __NJNLA __IANJ <b>Become NJTA Member TODAY &amp; Pay Member FEE</b>	<b>MEMBERS</b> • NJTA • GCSANJ • SFMANJ • NJLCA • IANJ • NJNLA	<b>**NON-MEMBERS</b> (\$95 Membership included for 2 or 3 Full Days)	<b>Registration TOTALS</b>
<b>3-DAYS:</b> Education • Trade Show • Food (Tues • Weds • Thurs) ** NON-Member Fee Includes ONE (1) NJTA \$95 Membership for 2022	<input type="checkbox"/> 1 = \$265 <input type="checkbox"/> 2 = \$530	<input type="checkbox"/> 1 = \$380 (\$285 + \$95) <input type="checkbox"/> 2 = \$760 (\$570 + \$190)	= \$ _____
<b>2-DAYS:</b> Education, Trade Show, Food (No Trade Show on Thurs) _____Tuesday _____Wednesday _____Thursday ** NON-Member Fee Includes ONE (1) NJTA \$95 Membership for 2022	<input type="checkbox"/> 1 = \$215 <input type="checkbox"/> 2 = \$430	<input type="checkbox"/> 1 = \$330 (\$235 + \$95) <input type="checkbox"/> 2 = \$660 (\$470 + \$190)	= \$ _____
<b>1-DAY:</b> Education, Trade Show, Food (No Trade Show on Thurs) _____Tuesday _____Wednesday _____Thursday	<input type="checkbox"/> 1 = \$165 <input type="checkbox"/> 2 = \$330	<input type="checkbox"/> 1 = \$215 <input type="checkbox"/> 2 = \$430	= \$ _____
Spouse: If need education, sign up as Attendee. If no education, use Trade Show option. <b>TRADE SHOW Only BOTH Days</b> (Tuesday AND Wednesday) <div style="border: 1px solid black; padding: 2px; display: inline-block;">Includes Food &amp; Learning Sessions ONLY on Trade Show Floor</div>	<input type="checkbox"/> 1 = \$145 <input type="checkbox"/> 2 = \$290	<input type="checkbox"/> 1 = \$165 <input type="checkbox"/> 2 = \$330	= \$ _____
<b>TRADE SHOW Only ONE Day</b> (Tuesday OR Wednesday)	<input type="checkbox"/> 1 = \$115 <input type="checkbox"/> 2 = \$230	<input type="checkbox"/> 1 = \$135 <input type="checkbox"/> 2 = \$270	= \$ _____
<b>OPTIONAL: ProFACT Fertilizer:</b> Training (No Charge) & EXAM @ \$90 Thursday PM	__ 1 = \$90 (Exam) __ 2 = \$180 Select: __ English __ Spanish		= \$ _____
<b>EXHIBITORS: ADDITIONAL BOOTH STAFF REGISTRATION:</b> MAXIMUM 4 per booth - Tuesday AND/OR Wednesday			__ \$160 EACH = \$ _____

<b>2022 MEMBERSHIP</b> New Jersey Turfgrass Association: __ RENEWAL __ NEW ** 2 or 3-Day NON-Member Fee Includes ONE (1) \$95 Membership MEMBERSHIP YEAR: January 1 - December 31, 2022 ___ INDIVIDUAL (1) Membership \$ 95 ___ BUSINESS Partners (1 to 4 Members) \$ 295 ___ TURFGRASS Partners (1 to 3 Members) \$ 225 <b>TURFGRASS PARTNERS:</b> __Golf Course __Lawn Care Applicator __Landscape/Lawn Maintenance __Cemetery __Irrigation __Parks & Recreation __Schools & Athletic Fields __Architect <b>BUSINESS PARTNERS:</b> __Manufacturer or Supplier __Sod Producer <b>Enter MEMBER NAME(S) Below:</b> 1. _____ 2. _____ 3. _____ 4. _____	<b>TOTALS</b>  <b>REGISTRATIONS</b> \$ _____  <b>MEMBERSHIPS</b> \$ _____  <b>TOTAL DUE:</b> \$ _____
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**PAYMENT INFORMATION:**

Make Checks Payable To: NEW JERSEY TURFGRASS ASSN or NJTA

Payment by: \_\_ Cash \_\_ Check # \_\_\_\_\_ \_\_ Purchase Order (P.O.) # \_\_\_\_\_

Credit Card Type: \_\_ VISA \_\_ MASTERCARD \_\_ AMERICAN EXPRESS • Contact Phone #: (\_\_\_\_\_) \_\_\_\_\_

Print Cardholder's Name \_\_\_\_\_

Card No. // \_\_\_\_\_ // \_\_\_\_\_ // \_\_\_\_\_ // \_\_\_\_\_ // Expiration Date (MM/YY) // \_\_\_\_\_ // \_\_\_\_\_ //

Security Code // \_\_\_\_\_ // Billing Address \_\_\_\_\_ Zip \_\_\_\_\_