

# 2020 DELEGATE REGISTRATION FORM

## REGISTRATION OPTIONS AND PRICING

	Early Before July 31, 2020	Late After July 31, 2020	\$ TOTAL
<b>TWO DAY DELEGATE REGISTRATION (WED. SEP. 2 &amp; THURS. SEP. 3)</b> Includes full access over two days to all show education sessions, trade show floor, two coffee breaks, water, drink tickets for the two trade floor receptions and all-industry reception.	<input type="checkbox"/> \$79	<input type="checkbox"/> \$99	
<b>ONE DAY DELEGATE REGISTRATION (WED. SEP. 2)</b> Includes full access on Wednesday, September 2 to all show education sessions, trade show floor, coffee break, water, drink ticket for the trade floor reception and all-industry reception.	<input type="checkbox"/> \$59	<input type="checkbox"/> \$79	
<b>ONE DAY DELEGATE REGISTRATION (THURS. SEP. 3)</b> Includes full access on Thursday, September 3 to all show education sessions, trade show floor, coffee break, water and drink ticket for the trade floor reception.	<input type="checkbox"/> \$59	<input type="checkbox"/> \$79	
<b>SUPPLIER DELEGATE REGISTRATION</b> Includes full access to all show education sessions, trade show floor, two coffee breaks, water, drink tickets for the two trade floor networking receptions and all-industry reception.	<input type="checkbox"/> \$1,500	<input type="checkbox"/> \$2,000	

## SPECIAL ISSA WORKSHOPS

<b>CIMS ISSA CERTIFICATION EXPERT (I.C.E.) WORKSHOP (9:00 a.m. - 4:30 p.m., Tuesday, September 1)</b> Achieving CIMS certification is not an easy task. ISSA Certification Experts (I.C.E.) are ready to provide training and consulting services to cleaning organizations interested in complying with and preparing to be certified to the CIMS standard.	<input type="checkbox"/> \$995
<b>GLOBAL BIORISK ADVISORY COUNCIL (GBAC) BIO-REMEDIATION &amp; RESPONSE FUNDAMENTALS CERTIFICATION (10:00 a.m. to 3:00 p.m., Tuesday, September 1)</b> Includes full access to all show education sessions, trade show floor, two coffee breaks, water, drink tickets for the two trade floor networking receptions and all-industry reception.	<input type="checkbox"/> \$650

## YOUR INFORMATION

FULL NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_

COMPANY: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ PROV./STATE: \_\_\_\_\_

POSTAL / ZIP CODE: \_\_\_\_\_ COUNTRY: \_\_\_\_\_

PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_ EMAIL: \_\_\_\_\_

## MORE ABOUT YOU

### What is the primary business of your organization (please select one)?

- |                                                      |                                                         |                                                        |
|------------------------------------------------------|---------------------------------------------------------|--------------------------------------------------------|
| <input type="checkbox"/> Building Owner              | <input type="checkbox"/> Industry Association           | <input type="checkbox"/> Residential Cleaner           |
| <input type="checkbox"/> Building Service Contractor | <input type="checkbox"/> In-House Service Provider      | <input type="checkbox"/> Sustainability Consultant     |
| <input type="checkbox"/> Buying Group                | <input type="checkbox"/> Manufacturer                   | <input type="checkbox"/> Wholesaler                    |
| <input type="checkbox"/> Distributor                 | <input type="checkbox"/> Manufacturer Representative    | <input type="checkbox"/> Other (Please Specify): _____ |
| <input type="checkbox"/> Environmental Services      | <input type="checkbox"/> Marketing Consultant           | _____                                                  |
| <input type="checkbox"/> Facility Maintenance        | <input type="checkbox"/> Media                          | _____                                                  |
| <input type="checkbox"/> Food Service                | <input type="checkbox"/> Property / Facility Management | _____                                                  |
| <input type="checkbox"/> Government                  |                                                         |                                                        |

### What types of facilities do you own, manage or sell products/services to? (please check all that apply):

- |                                                           |                                                         |                                                        |
|-----------------------------------------------------------|---------------------------------------------------------|--------------------------------------------------------|
| <input type="checkbox"/> Airports                         | <input type="checkbox"/> Courthouses                    | <input type="checkbox"/> Manufacturing                 |
| <input type="checkbox"/> Apartments                       | <input type="checkbox"/> Date Centres                   | <input type="checkbox"/> Military                      |
| <input type="checkbox"/> Branch/Regional Offices          | <input type="checkbox"/> Education / Academic           | <input type="checkbox"/> Research Centres              |
| <input type="checkbox"/> Call Centres                     | <input type="checkbox"/> Financial/Banks                | <input type="checkbox"/> Residential / Dormitory       |
| <input type="checkbox"/> Casinos / Gaming                 | <input type="checkbox"/> Golf / Health Clubs            | <input type="checkbox"/> Religious                     |
| <input type="checkbox"/> Commercial / Office              | <input type="checkbox"/> Government                     | <input type="checkbox"/> Retail / Shopping Centre      |
| <input type="checkbox"/> Community / Recreational Centres | <input type="checkbox"/> Healthcare / Hospitals         | <input type="checkbox"/> Other (Please Specify): _____ |
| <input type="checkbox"/> Condominiums                     | <input type="checkbox"/> Libraries                      | _____                                                  |
| <input type="checkbox"/> Correctional Facilities          | <input type="checkbox"/> Lodging / Hospitality / Hotels | _____                                                  |
|                                                           | <input type="checkbox"/> Mixed Use with Office          | _____                                                  |

### Do you give ISSA Canada permission to post videos/photographs taken of you at the show?

- Yes  No

### Do you have any severe food allergies? (i.e. nuts, dairy, etc.). Please specify: \_\_\_\_\_

### I provide my consent to receive the following items:

- Information on future ISSA Canada events  
 ISSA e-newsletters

Your email will not be provided to any third party and you can unsubscribe at any time.

## THREE WAYS TO REGISTER:

- Register online at: [ISSAShowCanada.com](http://ISSAShowCanada.com)
- Fax this form to: 1-416-512-8344
- Mail this form to: ISSA Show Canada  
c/o MediaEdge Communications Inc.  
Attn: Brad Moore  
2001 Sheppard Ave. E., Suite 500  
Toronto, ON M2J 4Z8

## PAYMENT - Method of Payment:

- VISA  MASTERCARD  AMERICAN EXPRESS  
 CHEQUE (Made payable to MEDIAEDGE COMMUNICATIONS INC.)  
\*\*Canadian Funds

Credit card number: \_\_\_\_\_

Security Code (CVV): \_\_\_\_\_

Name on card: \_\_\_\_\_

Expiry: \_\_\_\_\_

Signature: \_\_\_\_\_

For additional registrations, please photocopy this form. Group registrations are available if you register more than five delegates from a single organization. Please contact: [bradm@mediaedge.ca](mailto:bradm@mediaedge.ca) for more details.

Sub Total \$ \_\_\_\_\_

Add 13% HST \_\_\_\_\_  
(Calculated on Sub Total)

TOTAL \$ \_\_\_\_\_

NOTE: "MEC" will appear on your credit card statement. CANCELLATION POLICY: A written email notice is required indicating your intent to cancel or substitute your registration. All cancellations and/or substitutions received prior to July 31, 2020 are subject to a processing fee of 20% of your conference registration fee. No refunds will be issued on cancellations if received after July 31, 2020 or for conference "no shows." If the 2020 Show is cancelled, Show delegates have the option of applying their delegate registration fees to the 2021 Show or to have their fees reimbursed in full. Please send all notification of cancellation or substitutions via email to Brad Moore, Director of Show Operations at: [bradm@mediaedge.ca](mailto:bradm@mediaedge.ca).