

## Group Registration Form

Complete this form if you would like to register **3 or more individuals** from your company to attend ICMI Contact Center Demo 2017. Group registration discounts apply to any combination of 3-Day or 2-Day passes.

*NOTE: While group discounts DO apply to Super Early Bird and Early Bird Pricing, it is NOT combinable with promotions or special offers. All discounts are subject to review before processing.*

### Group Discounts:

**3-5 attendees: 20% discount**  
**6-10 attendees: 30% discount**  
**11+ attendees: 40% discount**

*Discount is taken from current pricing and is not combinable with promotions or special offers.*

## How to Register

All group discount forms must be submitted from the same company, within 24 hours of one another

**STEP 1: Review Conference Packages (Workshop & Contact Center Tours if applicable) – page 2**

**STEP 2: Complete Coordinator Contact Information – page 3**

**STEP 3: Complete the Method of Payment section – page 4**

**STEP 4: Fill out individual information for each registrant in group & select package options—starts on page 4**

*Note: if the individuals registered have the same mailing address as the coordinator, please write “same”*

**STEP 5: Fill out the form, then Fax, Mail or Email it. You can also call us with any questions! We are happy to help.**

**Mail:**

UBM Events Registration Department  
ICMI Contact Center Demo 2017  
131 W First Street  
Duluth, MN 55802

**Email:** [ICMIDemoReg@ubm.com](mailto:ICMIDemoReg@ubm.com)

**Fax:** 218-740-6883

**Phone:** 866.535.9002

## Conference Packages:

<b>Dates:</b>	Mon., Tues., Wed 9/25 - 9/27	Tuesday & Wednesday 9/26 - 9/27
<b>Pricing:</b> Super Early Bird/Early Bird/Regular*	\$1899/\$1999/\$2199	\$1599/\$1699/\$1899
<b>Package (inclusions below):</b>	<b>3-Day Pass</b>	<b>2-Day Pass</b>
<i>Pre-Conf. Workshops and Tours (9/25)</i>	X	
<i>Main Conference Sessions (9/26-9/27)</i>	X	X
<i>Conference Materials (access prior to event)</i>	X	X
<i>Networking Events</i>	X	X
<i>Breakfast, Lunches, Receptions</i>	X (Mon–Wed)	X (Tues-Wed)
<i>Headliner Keynote Presentations</i>	X	X
<i>Demo Hall Entry</i>	X	X

\*Super Early Bird expires July 31, 2017 and Early Bird expires September 1, 2017.

## Pre-Conference Options (3-Day pass holders only):

**Workshops & Contact Center Tours – Monday, September 25** \*Only available with 3-day Pass

\*\* TOURS HAVE LIMITED AVAILABILITY AND CANNOT BE GUARANTEED – REGISTER EARLY!

Please visit our [website](#) to see which tours are currently available.

### HALF-DAY LOCAL CONTACT CENTER TOURS

<b>MORNING TOURS, 8:30AM – 12:00PM</b>	<b>AFTERNOON TOURS, 1:30AM – 5:00PM</b>
<del>Tour A1: Entertainment Benefits Group</del>	<del>Tour P1: Entertainment Benefits Group</del>
Tour A2: MGM Resorts Int'l Customer Care Ctr	Tour P2: GES
<del>Tour A3: One Nevada Credit Union</del>	Tour P3: MGM Resorts Int'l Customer Care Ctr
Tour A4: Telus International	Tour P4: One Nevada Credit Union
Tour A5: UPS	Tour P5: Telus International
Tour A6: Zappos	Tour P6: UPS

### HALF-DAY WORKSHOPS FEATURING ICMI 'FIVE STAR' SPEAKERS

#### MORNING WORKSHOPS, 8:30AM-12:00PM

W1: How to Quickly Design and Develop Agent Training, JEFF TOISTER

W2: The Principles of Effective Contact Center Management, BRAD CLEVELAND

W3: Journey Mapping: Creating an Exponentially More Effective Customer Experience, DIANNE DURKIN

#### AFTERNOON WORKSHOPS, 1:30PM-5:00PM

W4: Coach Your Customer Service Agents to Be Better Writers, LESLIE O'FLAHAVAN

W5: Moving Metrics into Action, TIM MONTGOMERY

W6: Contact Center Technology 101: What Every Professional Needs to Know, LORI BOCKLUND

W7: MasterMinds, JUSTIN ROBBINS

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## Group Coordinator Contact Information

Coordinator's Name	Phone
Coordinator's Email	
Job Title	Company Name
Address	
City / State / Zip	
Country / Postal Code	

### EVENT BADGES

Badges will not be mailed in advance of the event and can only be collected on-site during registration/check-in hours. Please care for your badge. A non-refundable replacement fee will apply for all lost, misplaced, stolen, forgotten, and duplicate badge requests.

### CANCELLATION POLICY

If you need to cancel, you may do so until August 25, 2017. A nonrefundable \$150 cancellation fee will be charged for cancellations. No-shows and cancellations after August 25, 2017 will be charged the full conference rate. Cancellation policies apply to all conference packages. Attendees who register prior to or after the deadline date who do not cancel in writing by the deadline date are liable for the package cost and will be charged for the full registration fee. Sorry, refunds and downgrades are not available after this date. If you are unable to attend the conference, we strongly recommend that you send a substitution in your place. Changes to registrations must be presented in written form. Please fax your cancellation or substitution request to 218-740-6883 using the "[Registration Change Form](#)". You may email your request to [icmidemoreg@ubm.com](mailto:icmidemoreg@ubm.com) or mail it to:

UBM Events Registration Department  
ICMI Contact Center Demo 2017  
131 W First Street  
Duluth, MN 55802

Substitutions are allowed only with the written permission of the original registrant. Please note that downgrades are not permissible.

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## Method of Payment

Payment by check, money order (drawn in US funds), or credit card must accompany your registration in order to be processed and receive your confirmation. **Please note: you are not registered until you receive confirmation via email from ICMI Contact Center Demo 2017.** The tax ID number is 11-2240940. Please email your W9 requests to [icmidemoreg@ubm.com](mailto:icmidemoreg@ubm.com).

Check or Money Order Enclosed # \_\_\_\_\_ (Make check payable to: CCDemo 2017)

Please send me an invoice (provide billing information below)

Charge my Credit Card (we accept Visa, MasterCard and American Express)

Cardholder Name \_\_\_\_\_ Phone \_\_\_\_\_

Credit Card Number \_\_\_\_\_ Exp. Date \_\_\_\_\_

Authorized Signature \_\_\_\_\_ Date \_\_\_\_\_

**By checking a box above, I understand I am not able to attend the conference until registration is paid in FULL**

**BILLING ADDRESS -**  Check here if billing address is the same as group coordinator's address.

Name	Telephone
Address	
City / State / Zip	
Country / Postal Code	

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## Registration 1

Participant's Name \_\_\_\_\_

Email \_\_\_\_\_

Job Title \_\_\_\_\_

Company Name \_\_\_\_\_

Address \_\_\_\_\_

City / State / Zip \_\_\_\_\_

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

Telephone \_\_\_\_\_

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### Conference Package Selection *\*Due to limited availability tours are not guaranteed*

**3 Day** *Indicate 1st, 2nd, & 3rd choices for 1 morning & 1 afternoon Tour or Workshop (see page 2 for selections)*

**Monday – AM**

\_\_\_ **Tour A1**     \_\_\_ **W1**  
\_\_\_ **Tour A2**     \_\_\_ **W2**  
\_\_\_ **Tour A3**     \_\_\_ **W3**  
\_\_\_ **Tour A4**  
\_\_\_ **Tour A5**  
\_\_\_ **Tour A6**

**Monday – PM**

\_\_\_ **Tour P1**     \_\_\_ **W4**  
\_\_\_ **Tour P2**     \_\_\_ **W5**  
\_\_\_ **Tour P3**     \_\_\_ **W6**  
\_\_\_ **Tour P4**     \_\_\_ **W7**  
\_\_\_ **Tour P5**  
\_\_\_ **Tour P6**

**2 Day**

*Tuesday and Wednesday  
Main Conference Sessions  
DO NOT require  
pre-registration.*

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## Registration 2

Participant's Name \_\_\_\_\_

Email \_\_\_\_\_

Job Title \_\_\_\_\_

Company Name \_\_\_\_\_

Address \_\_\_\_\_

City / State / Zip \_\_\_\_\_

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

Telephone \_\_\_\_\_

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### Conference Package Selection

**3 Day** *Indicate 1st, 2nd, & 3rd choices for 1 morning & 1 afternoon Tour or Workshop (see page 2 for selections)*

**Monday – AM**

\_\_\_ **Tour A1**     \_\_\_ **W1**  
\_\_\_ **Tour A2**     \_\_\_ **W2**  
\_\_\_ **Tour A3**     \_\_\_ **W3**  
\_\_\_ **Tour A4**  
\_\_\_ **Tour A5**  
\_\_\_ **Tour A6**

**Monday – PM**

\_\_\_ **Tour P1**     \_\_\_ **W4**  
\_\_\_ **Tour P2**     \_\_\_ **W5**  
\_\_\_ **Tour P3**     \_\_\_ **W6**  
\_\_\_ **Tour P4**     \_\_\_ **W7**  
\_\_\_ **Tour P5**  
\_\_\_ **Tour P6**

**2 Day**

*Tuesday and Wednesday  
Main Conference Sessions  
DO NOT require  
pre-registration.*

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## Registration 3

Participant's Name \_\_\_\_\_

Email \_\_\_\_\_

Job Title \_\_\_\_\_ Company Name \_\_\_\_\_

Address \_\_\_\_\_

City / State / Zip \_\_\_\_\_

Country / Postal Code \_\_\_\_\_ Telephone \_\_\_\_\_

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### Conference Package Selection

**3 Day** *Indicate 1st, 2nd, & 3rd choices for 1 morning & 1 afternoon Tour or Workshop (see page 2 for selections)*

**Monday – AM**

\_\_\_ ~~Tour A1~~     \_\_\_ W1  
\_\_\_ ~~Tour A2~~     \_\_\_ W2  
\_\_\_ ~~Tour A3~~     \_\_\_ W3  
\_\_\_ ~~Tour A4~~  
\_\_\_ ~~Tour A5~~  
\_\_\_ ~~Tour A6~~

**Monday – PM**

\_\_\_ ~~Tour P1~~     \_\_\_ W4  
\_\_\_ ~~Tour P2~~     \_\_\_ W5  
\_\_\_ ~~Tour P3~~     \_\_\_ W6  
\_\_\_ ~~Tour P4~~     \_\_\_ W7  
\_\_\_ ~~Tour P5~~  
\_\_\_ ~~Tour P6~~

**2 Day**

*Tuesday and Wednesday  
Main Conference Sessions  
DO NOT require  
pre-registration.*

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## Registration 4

Participant's Name \_\_\_\_\_

Email \_\_\_\_\_

Job Title \_\_\_\_\_ Company Name \_\_\_\_\_

Address \_\_\_\_\_

City / State / Zip \_\_\_\_\_

Country / Postal Code \_\_\_\_\_ Telephone \_\_\_\_\_

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### Conference Package Selection

**3 Day** *Indicate 1st, 2nd, & 3rd choices for 1 morning & 1 afternoon Tour or Workshop (see page 2 for selections)*

**Monday – AM**

\_\_\_ ~~Tour A1~~     \_\_\_ W1  
\_\_\_ ~~Tour A2~~     \_\_\_ W2  
\_\_\_ ~~Tour A3~~     \_\_\_ W3  
\_\_\_ ~~Tour A4~~  
\_\_\_ ~~Tour A5~~  
\_\_\_ ~~Tour A6~~

**Monday – PM**

\_\_\_ ~~Tour P1~~     \_\_\_ W4  
\_\_\_ ~~Tour P2~~     \_\_\_ W5  
\_\_\_ ~~Tour P3~~     \_\_\_ W6  
\_\_\_ ~~Tour P4~~     \_\_\_ W7  
\_\_\_ ~~Tour P5~~  
\_\_\_ ~~Tour P6~~

**2 Day**

*Tuesday and Wednesday  
Main Conference Sessions  
DO NOT require  
pre-registration.*

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## Registration 5

Participant's Name \_\_\_\_\_

Email \_\_\_\_\_

Job Title \_\_\_\_\_ Company Name \_\_\_\_\_

Address \_\_\_\_\_

City / State / Zip \_\_\_\_\_

Country / Postal Code \_\_\_\_\_ Telephone \_\_\_\_\_

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### Conference Package Selection

**3 Day** *Indicate 1st, 2nd, & 3rd choices for 1 morning & 1 afternoon Tour or Workshop (see page 2 for selections)*

**Monday – AM**

- \_\_\_ ~~Tour A1~~     \_\_\_ W1  
\_\_\_ Tour A2     \_\_\_ W2  
\_\_\_ ~~Tour A3~~     \_\_\_ W3  
\_\_\_ Tour A4  
\_\_\_ Tour A5  
\_\_\_ Tour A6

**Monday – PM**

- \_\_\_ ~~Tour P1~~     \_\_\_ W4  
\_\_\_ Tour P2     \_\_\_ W5  
\_\_\_ Tour P3     \_\_\_ W6  
\_\_\_ Tour P4     \_\_\_ W7  
\_\_\_ Tour P5  
\_\_\_ Tour P6

**2 Day**

*Tuesday and Wednesday  
Main Conference Sessions  
DO NOT require  
pre-registration.*

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## Registration 6

Participant's Name \_\_\_\_\_

Email \_\_\_\_\_

Job Title \_\_\_\_\_ Company Name \_\_\_\_\_

Address \_\_\_\_\_

City / State / Zip \_\_\_\_\_

Country / Postal Code \_\_\_\_\_ Telephone \_\_\_\_\_

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### Conference Package Selection

**3 Day** *Indicate 1st, 2nd, & 3rd choices for 1 morning & 1 afternoon Tour or Workshop (see page 2 for selections)*

**Monday – AM**

- \_\_\_ ~~Tour A1~~     \_\_\_ W1  
\_\_\_ Tour A2     \_\_\_ W2  
\_\_\_ ~~Tour A3~~     \_\_\_ W3  
\_\_\_ Tour A4  
\_\_\_ Tour A5  
\_\_\_ Tour A6

**Monday – PM**

- \_\_\_ ~~Tour P1~~     \_\_\_ W4  
\_\_\_ Tour P2     \_\_\_ W5  
\_\_\_ Tour P3     \_\_\_ W6  
\_\_\_ Tour P4     \_\_\_ W7  
\_\_\_ Tour P5  
\_\_\_ Tour P6

**2 Day**

*Tuesday and Wednesday  
Main Conference Sessions  
DO NOT require  
pre-registration.*

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## Registration 7

Participant's Name \_\_\_\_\_

Email \_\_\_\_\_

Job Title \_\_\_\_\_ Company Name \_\_\_\_\_

Address \_\_\_\_\_

City / State / Zip \_\_\_\_\_

Country / Postal Code \_\_\_\_\_ Telephone \_\_\_\_\_

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### Conference Package Selection

**3 Day** *Indicate 1st, 2nd, & 3rd choices for 1 morning & 1 afternoon Tour or Workshop (see page 2 for selections)*

**Monday – AM**

\_\_\_ ~~Tour A1~~     \_\_\_ W1  
\_\_\_ ~~Tour A2~~     \_\_\_ W2  
\_\_\_ ~~Tour A3~~     \_\_\_ W3  
\_\_\_ ~~Tour A4~~  
\_\_\_ ~~Tour A5~~  
\_\_\_ ~~Tour A6~~

**Monday – PM**

\_\_\_ ~~Tour P1~~     \_\_\_ W4  
\_\_\_ ~~Tour P2~~     \_\_\_ W5  
\_\_\_ ~~Tour P3~~     \_\_\_ W6  
\_\_\_ ~~Tour P4~~     \_\_\_ W7  
\_\_\_ ~~Tour P5~~  
\_\_\_ ~~Tour P6~~

**2 Day**

*Tuesday and Wednesday  
Main Conference Sessions  
DO NOT require  
pre-registration.*

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## Registration 8

Participant's Name \_\_\_\_\_

Email \_\_\_\_\_

Job Title \_\_\_\_\_ Company Name \_\_\_\_\_

Address \_\_\_\_\_

City / State / Zip \_\_\_\_\_

Country / Postal Code \_\_\_\_\_ Telephone \_\_\_\_\_

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### Conference Package Selection

**3 Day** *Indicate 1st, 2nd, & 3rd choices for 1 morning & 1 afternoon Tour or Workshop (see page 2 for selections)*

**Monday – AM**

\_\_\_ ~~Tour A1~~     \_\_\_ W1  
\_\_\_ ~~Tour A2~~     \_\_\_ W2  
\_\_\_ ~~Tour A3~~     \_\_\_ W3  
\_\_\_ ~~Tour A4~~  
\_\_\_ ~~Tour A5~~  
\_\_\_ ~~Tour A6~~

**Monday – PM**

\_\_\_ ~~Tour P1~~     \_\_\_ W4  
\_\_\_ ~~Tour P2~~     \_\_\_ W5  
\_\_\_ ~~Tour P3~~     \_\_\_ W6  
\_\_\_ ~~Tour P4~~     \_\_\_ W7  
\_\_\_ ~~Tour P5~~  
\_\_\_ ~~Tour P6~~

**2 Day**

*Tuesday and Wednesday  
Main Conference Sessions  
DO NOT require  
pre-registration.*

If you need to register more than 10 attendees, print this page first, scratch out the '10' and note the registration number (11, etc) and scan and send in with the prior pages.

## Registration 9

Participant's Name \_\_\_\_\_

Email \_\_\_\_\_

Job Title \_\_\_\_\_ Company Name \_\_\_\_\_

Address \_\_\_\_\_

City / State / Zip \_\_\_\_\_

Country / Postal Code \_\_\_\_\_ Telephone \_\_\_\_\_

### Conference Package Selection

**3 Day** *Indicate 1st, 2nd, & 3rd choices for 1 morning & 1 afternoon Tour or Workshop (see page 2 for selections)*

#### Monday – AM

\_\_\_ **Tour A1**    \_\_\_ **W1**  
\_\_\_ **Tour A2**    \_\_\_ **W2**  
\_\_\_ **Tour A3**    \_\_\_ **W3**  
\_\_\_ **Tour A4**  
\_\_\_ **Tour A5**  
\_\_\_ **Tour A6**

#### Monday – PM

\_\_\_ **Tour P1**    \_\_\_ **W4**  
\_\_\_ **Tour P2**    \_\_\_ **W5**  
\_\_\_ **Tour P3**    \_\_\_ **W6**  
\_\_\_ **Tour P4**    \_\_\_ **W7**  
\_\_\_ **Tour P5**  
\_\_\_ **Tour P6**

**2 Day**

*Tuesday and Wednesday  
Main Conference Sessions  
DO NOT require  
pre-registration.*

## Registration 10

Participant's Name \_\_\_\_\_

Email \_\_\_\_\_

Job Title \_\_\_\_\_ Company Name \_\_\_\_\_

Address \_\_\_\_\_

City / State / Zip \_\_\_\_\_

Country / Postal Code \_\_\_\_\_ Telephone \_\_\_\_\_

### Conference Package Selection

**3 Day** *Indicate 1st, 2nd, & 3rd choices for 1 morning & 1 afternoon Tour or Workshop (see page 2 for selections)*

#### Monday – AM

\_\_\_ **Tour A1**    \_\_\_ **W1**  
\_\_\_ **Tour A2**    \_\_\_ **W2**  
\_\_\_ **Tour A3**    \_\_\_ **W3**  
\_\_\_ **Tour A4**  
\_\_\_ **Tour A5**  
\_\_\_ **Tour A6**

#### Monday – PM

\_\_\_ **Tour P1**    \_\_\_ **W4**  
\_\_\_ **Tour P2**    \_\_\_ **W5**  
\_\_\_ **Tour P3**    \_\_\_ **W6**  
\_\_\_ **Tour P4**    \_\_\_ **W7**  
\_\_\_ **Tour P5**  
\_\_\_ **Tour P6**

**2 Day**

*Tuesday and Wednesday  
Main Conference Sessions  
DO NOT require  
pre-registration.*