

May 22-25, 2017

Walt Disney World® Dolphin Resort
1500 EPCOT Resorts Blvd.
Lake Buena Vista, FL 32830

Group Registration Form

Managed and Produced by ICMI, a division of UBM, LLC

Complete this form if you would like to register **3 or more individuals** from your company to attend ICMI's Contact Center Expo & Conference 2017. Group registration discounts apply to any combination of 4 Day, 3 Day or 2 Day passes.

[While group discounts do apply to current Monthly Pricing, it is NOT combinable with promotions or special offers. All discounts are subject to review before processing.]

Group Discount Rates:

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

Not combinable with promotions or special offers.

Contact Center Expo & Conference is a trade-only event. You must be 18 years of age and a qualified buyer of call center technology, applications, or products to visit the exhibit hall.

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 & Training, if applicable) – page 1 & 2

STEP 2: Complete Coordinator Contact Information & Method of Payment – page 3

STEP 3: Fill out individual information for each registrant in group & select package options – starts on page 4

STEP 4: Print out and Fax or Mail form; or Save it and Email It.

Email: ICMIExpoReg@ubm.com **Fax:** 218.740.6883

Mail: ICMI Expo
Attn: Event Registration Services Group
131 W First Street
Duluth, MN 55802

Conference Packages:

Pass Type (inclusions below):	4 Day	3 Day	2 Day
Dates:	Mon-Thurs, May 22-25	Mon-Wed, May 22-24	Tues-Wed, May 23-24
Pricing: Jan Rate (exp. Jan 31)* / Regular Pricing	\$2399 / \$2799	\$2099 / \$2499	\$1799 / \$2199
<i>Workshops and Contact Center Tours (5/22)</i>	X	X	
<i>Main Conference Sessions (5/23-24)</i>	X	X	X
<i>Conference Materials (access prior to show)</i>	X	X	X
<i>Keynote Addresses</i>	X	X	X
<i>Expo Hall Access (5/23-24)</i>	X	X	X
<i>Breakfast, Lunches, Coffee Breaks</i>	X (Mon-Thurs)	X (Mon-Wed)	X (Tues-Wed)
<i>Evening Receptions</i>	X	X	X
<i>ICMI Global Contact Center Awards Party</i>	X	X	X
<i>Full day Training or Contact Center Tours (5/25)</i>	X		

* Price increases \$100 at the end of every month until reaching the regular price.

Pre & Post Options (for 3 Day and 4 Day Passes):

Workshops & Contact Center Tours – Monday, May 22

*Only available with 3 Day and 4 Day Passes

****TOURS HAVE LIMITED AVAILABILITY AND CANNOT BE GUARANTEED**

MORNING, 8:30am – 12:00pm

Pre-1: The Principles of Effective Contact Center Management (*Brad Cleveland*)

Pre-2: The Secrets of Agent Engagement: A Step-by-Step Guide (*Jeff Toister*)

Pre-3: Contact Center Technology 101: What Every Professional Needs to Know (*Lori Bocklund*)

Tour 1: Entertainment Benefits Group

Tour 2: Heart of Florida United Way 2-1-1

Tour 3: Walgreens

Tour 4: Walt Disney World Reservations Center

AFTERNOON, 1:30pm – 5:00pm

Pre-5: Breathe New Life Into Your Contact Center Metrics (*Gina Szabo*)

Pre-6: Developing a Customer Experience Strategy in an Omni-Channel World (*Laura Grimes, Dennis Crumb, Maureen Russolo*)

Pre-7: Transformational Leadership: Innovative Solutions for Engaging and Managing the Workforce

Tour 5: Entertainment Benefits Group

Tour 6: Heart of Florida United Way 2-1-1

Tour 7: JetBlue University

FULL DAY, 8:30am – 5:00pm

Pre-4: ICMI Small Contact Center Workshop (*Rose Polchin*)

Post-Conf. Training or Contact Center Tours – Thursday, May 25

*Only available with 4 Day Pass

FULL DAY, 8:30am – 5:00pm

Post-1: ICMI Quality Form Development Workshop (*Gina Szabo*)

Post-2: ICMI More than Metrics: Harnessing Data to Drive Performance Workshop (*Laura Grimes*)

Post-3: Master Minds Workshop (*Justin Robbins*)

Post-4: Full Day Tours - Entertainment Benefits Group AND Walgreens

Group Coordinator Contact Information

Coordinator's Email

Coordinator's Name

Telephone

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 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 Friday, April 14, 2017. A non-refundable \$150 cancellation fee will be charged. No-shows and cancellations after Friday, April 14, 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, no refunds are available after this date. If you are unable to attend the conference, we strongly recommend that you send a substitution in your place. Substitutions are allowed only with the written permission of the original registrant. Changes to registrations must be presented in written form (form available on event website).

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 online or via an email from Contact Center Expo & Conference 2017.** The tax ID number is 11-2240940. Please email your W9 requests to icmiexporeg@ubm.com.

- ☐ Check or Money Order Enclosed # _____ (make check payable to: CCExpo 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

Registration # 1

Participant's Name _____

Email _____

Job Title _____

Address _____

City / State / Zip _____

Country / Postal Code _____

Telephone _____

Conference Package Selection (Select one below)

☐ **4 Day** *Indicate 1st, 2nd, & 3rd choices for 1 Monday morning & 1 afternoon Workshop or Tour OR Full day; and one Thursday full day*

Mon – AM	Mon – PM	Thurs– Full Day
___ Pre-1	___ Pre-5	___ Post-1
___ Pre-2	___ Pre-6	___ Post-2
___ Pre-3	___ Pre-7	___ Post-3
___ Tour-1	___ Tour-5	___ Post 4/Tours
___ Tour-2	___ Tour-6	
___ Tour-3	___ Tour-7	
___ Tour-4		

Mon – FULL DAY
___ Pre-4

☐ **3 Day** *Indicate 1st, 2nd, & 3rd choices for 1 Monday morning & 1 afternoon Workshop or Tour OR Full Day*

Mon – AM	Mon – PM	Mon – FULL DAY
___ Pre-1	___ Pre-5	___ Pre-4
___ Pre-2	___ Pre-6	
___ Pre-3	___ Pre-7	
___ Tour-1	___ Tour-5	
___ Tour-2	___ Tour-6	
___ Tour-3	___ Tour-7	
___ Tour-4		

☐ **2 Day**

*Tues & Wed
Main Conference
Sessions DO NOT
require
pre-registration.*

*NOTE: Due to limited availability tours are not guaranteed.
Visit ICMI.com for current availability.*

☐ Check the box if you want to add-on the Executive Connection (\$500 upgrade – Limited to 100 senior executives).

Registration # 2

Participant's Name _____

Email _____

Job Title _____

Address _____

City / State / Zip _____

Country / Postal Code _____

Telephone _____

Conference Package Selection (Select one below)

☐ **4 Day** *Indicate 1st, 2nd, & 3rd choices for 1 Monday morning & 1 afternoon Workshop or Tour OR Full day; and one Thursday full day*

Mon – AM	Mon – PM	Thurs– Full Day
___ Pre-1	___ Pre-5	___ Post-1
___ Pre-2	___ Pre-6	___ Post-2
___ Pre-3	___ Pre-7	___ Post-3
___ Tour-1	___ Tour-5	___ Post 4/Tours
___ Tour-2	___ Tour-6	
___ Tour-3	___ Tour-7	
___ Tour-4		

Mon – FULL DAY
___ Pre-4

☐ **3 Day** *Indicate 1st, 2nd, & 3rd choices for 1 Monday morning & 1 afternoon Workshop or Tour OR Full Day*

Mon – AM	Mon – PM	Mon – FULL DAY
___ Pre-1	___ Pre-5	___ Pre-4
___ Pre-2	___ Pre-6	
___ Pre-3	___ Pre-7	
___ Tour-1	___ Tour-5	
___ Tour-2	___ Tour-6	
___ Tour-3	___ Tour-7	
___ Tour-4		

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Registration # 3

Participant's Name _____

Email _____

Job Title _____

Address _____

City / State / Zip _____

Country / Postal Code _____

Telephone _____

Conference Package Selection (Select one below)

☐ **4 Day** *Indicate 1st, 2nd, & 3rd choices for 1 Monday morning & 1 afternoon Workshop or Tour OR Full day; and one Thursday full day*

Mon – AM	Mon – PM	Thurs– Full Day
___ Pre-1	___ Pre-5	___ Post-1
___ Pre-2	___ Pre-6	___ Post-2
___ Pre-3	___ Pre-7	___ Post-3
___ Tour-1	___ Tour-5	___ Post 4/Tours
___ Tour-2	___ Tour-6	
___ Tour-3	___ Tour-7	
___ Tour-4		

Mon – FULL DAY
___ Pre-4

☐ **3 Day** *Indicate 1st, 2nd, & 3rd choices for 1 Monday morning & 1 afternoon Workshop or Tour OR Full Day*

Mon – AM	Mon – PM	Mon – FULL DAY
___ Pre-1	___ Pre-5	___ Pre-4
___ Pre-2	___ Pre-6	
___ Pre-3	___ Pre-7	
___ Tour-1	___ Tour-5	
___ Tour-2	___ Tour-6	
___ Tour-3	___ Tour-7	
___ Tour-4		

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Registration # 4

Participant's Name _____

Email _____

Job Title _____

Address _____

City / State / Zip _____

Country / Postal Code _____

Telephone _____

Conference Package Selection (Select one below)

☐ **4 Day** *Indicate 1st, 2nd, & 3rd choices for 1 Monday morning & 1 afternoon Workshop or Tour OR Full day; and one Thursday full day*

Mon – AM	Mon – PM	Thurs– Full Day
___ Pre-1	___ Pre-5	___ Post-1
___ Pre-2	___ Pre-6	___ Post-2
___ Pre-3	___ Pre-7	___ Post-3
___ Tour-1	___ Tour-5	___ Post 4/Tours
___ Tour-2	___ Tour-6	
___ Tour-3	___ Tour-7	
___ Tour-4		

Mon – FULL DAY
___ Pre-4

☐ **3 Day** *Indicate 1st, 2nd, & 3rd choices for 1 Monday morning & 1 afternoon Workshop or Tour OR Full Day*

Mon – AM	Mon – PM	Mon – FULL DAY
___ Pre-1	___ Pre-5	___ Pre-4
___ Pre-2	___ Pre-6	
___ Pre-3	___ Pre-7	
___ Tour-1	___ Tour-5	
___ Tour-2	___ Tour-6	
___ Tour-3	___ Tour-7	
___ Tour-4		

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Registration # 5

Participant's Name _____

Email _____

Job Title _____

Address _____

City / State / Zip _____

Country / Postal Code _____

Telephone _____

Conference Package Selection (Select one below)

☐ **4 Day** *Indicate 1st, 2nd, & 3rd choices for 1 Monday morning & 1 afternoon Workshop or Tour OR Full day; and one Thursday full day*

Mon – AM	Mon – PM	Thurs– Full Day
___ Pre-1	___ Pre-5	___ Post-1
___ Pre-2	___ Pre-6	___ Post-2
___ Pre-3	___ Pre-7	___ Post-3
___ Tour-1	___ Tour-5	___ Post 4/Tours
___ Tour-2	___ Tour-6	
___ Tour-3	___ Tour-7	
___ Tour-4		

Mon – FULL DAY
___ Pre-4

☐ **3 Day** *Indicate 1st, 2nd, & 3rd choices for 1 Monday morning & 1 afternoon Workshop or Tour OR Full Day*

Mon – AM	Mon – PM	Mon – FULL DAY
___ Pre-1	___ Pre-5	___ Pre-4
___ Pre-2	___ Pre-6	
___ Pre-3	___ Pre-7	
___ Tour-1	___ Tour-5	
___ Tour-2	___ Tour-6	
___ Tour-3	___ Tour-7	
___ Tour-4		

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Registration # 6

Participant's Name _____

Email _____

Job Title _____

Address _____

City / State / Zip _____

Country / Postal Code _____

Telephone _____

Conference Package Selection (Select one below)

☐ **4 Day** *Indicate 1st, 2nd, & 3rd choices for 1 Monday morning & 1 afternoon Workshop or Tour OR Full day; and one Thursday full day*

Mon – AM	Mon – PM	Thurs– Full Day
___ Pre-1	___ Pre-5	___ Post-1
___ Pre-2	___ Pre-6	___ Post-2
___ Pre-3	___ Pre-7	___ Post-3
___ Tour-1	___ Tour-5	___ Post 4/Tours
___ Tour-2	___ Tour-6	
___ Tour-3	___ Tour-7	
___ Tour-4		

Mon – FULL DAY
___ Pre-4

☐ **3 Day** *Indicate 1st, 2nd, & 3rd choices for 1 Monday morning & 1 afternoon Workshop or Tour OR Full Day*

Mon – AM	Mon – PM	Mon – FULL DAY
___ Pre-1	___ Pre-5	___ Pre-4
___ Pre-2	___ Pre-6	
___ Pre-3	___ Pre-7	
___ Tour-1	___ Tour-5	
___ Tour-2	___ Tour-6	
___ Tour-3	___ Tour-7	
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