#### Registration

**Adult (20+)** – Registration includes meetings, seminars, and Exhibit Hall admission.

**Child/Youth (3–19)** – Registration includes meetings, off-site activities (ages 7-19), and Exhibit Hall admission.

**Infants/Toddlers (0–2)** – Registration is free of charge. Childcare is provided during meetings and seminars.

#### Registration Rates (Meals are not included.)

ASI Members:	Advanced	On-site
Adult	\$130	\$140
Child/Youth (3–19)	\$85	\$95
Non-Members:	Advanced	On-site
Adult	\$165	\$175
Child/Youth (3-19)	\$100	\$110

# **General Information**

#### Meals

A meal packet includes 7 vegetarian/vegan meals (breakfast and supper on Thursday and Friday; and breakfast, lunch, and supper on Sabbath). Meal packets and individual meals may be purchased with registration or on-site at the convention.

#### **Changes or Substitutions**

Pre-convention registration changes or substitutions must be made by July 15, 2014. Changes or substitutions after July 15 must be made on-site at the convention starting August 6, 2014.

#### **Cancellation Policy**

A 90% refund of paid registration fees will be given ONLY IF the request is made by e-mail to asi@nad.adventist.org or by fax to 301-622-5017, AND the request is auto-dated (by fax or e-mail) before midnight, Aug. 5, 2014. Cancellation refunds will be issued no later than 30 days after the convention.

#### **Member Rates**

To register at ASI member rates, the attendee or organization's ASI membership must have been approved before April 15, 2014, and membership dues must be current including 2014.

#### **Local Guests**

Attendees, exhibitors, and exhibitor assistants must wear ASI-issued identification badges while attending general sessions, seminars, exhibit hall and youth programs. Identification badges are provided to registered attendees, exhibitors, and exhibitor assistants at the convention registration desk. Local guests may attend evening and Sabbath meetings without registering.

#### **Visa Letters of Invitation**

Registered attendees who require a visa to enter the United States may request a Letter of Invitation online at www.ASIministries.org. Letters of Invitation for the 2014 ASI International Convention cannot be issued after June 2, 2014. A copy of denial letter or other proof of visa denial from the U.S. Embassy or Consulate must be submitted with any request for a cancellation refund.

# **Accommodations**



#### \$124.00 Amway Grand Plaza Hotel

187 Monroe Avenue Grand Rapids, MI 49503 616-774-2000

#### \$124.00 Courtyard Grand Rapids

11 Monroe Avenue NW Grand Rapids, MI 49503 616-242-6000

#### \$134.00 JW Marriot Grand Rapids

235 Louis Campau NW Grand Rapids, MI 49503 616-242-1500

Attendees and Exhibitors must arrange their own accom-

modations. Registration fees do not include lodging. If making reservations by phone, ask for the ASI rate, available through July 14. If problems occur with your reservation, call George Adams at 240-529-3436 or Barb Schumacher at 507-226-2900. Cancel up to 24 hours before arrival date for full refund. Visit www.ASIministries.org for additional information.

### www.ASIministries.org

Anyone who plans to attend ANY OR ALL of the convention sessions or seminars or to visit the Exhibit Hall MUST REGISTER. Please type or print clearly, as this information will appear on your identification badge. For Registration Rates see the Attendee Information page at far left. (Use additional pages as necessary.)

TOTAL \$\_\_\_\_

Paper registration must be received in the ASI office no later than July 15 (do not mail paper registration after July 12). Online registration will continue through midnight August 5, 2014. Registration changes or substitutions after July 15 must be made on-site at the convention in Grand Rapids.

E-mail: ASI@nad.adventist.org www.ASIministries.org

				ASI Member?	Exhibitor Assistant?	Child/ Youth?	Ages 0-2? (Free)	Age of Child Youth or Infant	Registration Fees
									\$
Attendee Name					_	_	_		
Attendee Name									\$
									\$
Attendee Name									
Attendee Name									\$
									\$
Attendee Name									*
Attendee Name									\$
, itteliaco i iamo								MEAL TOTA	L \$
Contact Person (responsible f	or registr	ation)							
Organization (if applicable)								TOTAL DU	JE \$
								R TODDLERS?	
Street/PO Box									ursery for infants and rs, evening meetings,
City	Stat	e/Province	Zip/Postal	Code	Country			rom 9 a.m. –11 a.m names above.	. and 4 p.m.— 6 p.m.
Home Phone	On-site	Cell Phone	E-mail of C	ontact Persor	า		Pay	ment	
$\square$ I have read and agree to	the ASI (	Cancellation Policy.		(signed)			□ Ch	neck#	
				(orginou)					able to ASI)
<b>MEAL OPTIONS</b>								oney Order edit Card: #	
		CHILD (3-12)	ı	ADULT/YOU	JTH (13+)				
Meal Packet (7 Meals)	Qty: _	x \$110 =	Qty: _	x \$1	75 =		Expir	ation Date:	
Thursday Breakfast	Oty:	x \$13 =		x S	\$22 =	-		•	digits)
Thursday Supper	Qty:	x \$18 =		x S	\$30 =	_	ivame	e as it appears o	n cara:
Friday Breakfast	Oty:	x \$13 =	Qty:	x S	\$22 =	_	Billin	g Address: 🗆 S	Same as ahove
Friday Supper	Qty:	x \$18 =		x S	\$30 =	_		g / (d d / 5 5 5 )	
Sabbath Breakfast	Qty:	x \$13 =		x S	\$22 =	_			
Sabbath Lunch		x \$18 =		x S	\$30 =	_	A	<b>Si</b>	
Sabbath Supper	Oty:	x \$18 =			\$30 =		-		Silver Spring, MD 20904
			,						Fax: 301-622-5017

TOTAL \$\_

#### Registration

The first exhibitor space registration includes:

One Primary Exhibitor Registration (all meetings)
One Meal Packet (7 vegetarian/vegan meals)

One Assistant Registration (meals not included)

#### **Space Options**

Three exhibit space options are offered:

**Quad Space:** A separate four-space island at the front of each row and throughout the middle aisle of the exhibit hall (12 four-space quads available).

**End Cap Space:** A double space at the end of each row (14 double space end caps available).

**Regular Space:** Exhibit spaces beyond quads and end caps.

Each exhibiting organization must register separately for booth space. An organization MAY NOT register for more than one space and share that space with other non-registered organizations. Non-registered exhibitors WILL NOT be permitted in the Exhibit Hall.

Advanced

On-site

Visit www.ASIministries.org to view the Exhibit Hall Floor Plan.

#### Registration Rates\*

**ASI Members:** 

Quad Space	\$2,585	\$2,845
End Cap Space	\$1,340	\$1,475
Primary Space	\$770	\$845
Additional Space	\$465	\$510
Non-Members:	Advanced	On-site
Non-Members: Quad Space	<b>Advanced</b> \$3,060	<b>On-site</b> \$3,365
Quad Space	\$3,060	\$3,365

<sup>\*</sup>A registration and/or exhibit space reservation is not complete until fees have been PAID IN FULL. ASI reserves the right to deny an exhibitor's application or to withdraw approval of an exhibit at any time.

#### **Exhibitor Assistants**

All exhibitor assistants must register.

#### **Convention Guide Exhibitor List**

Exhibiting organizations that register by July 1, 2014, will be included in the Convention Guide.

#### **Exhibitor Packet**

After completing registration, access the Exhibitor Packet at www.ASIministries.org. If electricity is needed for the exhibit, it must be ordered from Exhibit Services Inc. using the forms and links contained in the Exhibitor Packet.

#### **Exhibit Set-up & Take-down**

Exhibitors must set up exhibit spaces between 8 a.m. and 5 p.m. (EST), Aug. 6, 2014. Exhibitors must dismantle and remove exhibits between 10:30 p.m. and midnight (EST) on Saturday, Aug. 9, 2014. Call Mike Clark at 479-233-1775 concerning any Exhibit Hall logistics issues.

#### **Exhibit Insurance**

Exhibitors must obtain their own insurance and bear any expenses due to damage or theft. ASI is not responsible for loss of exhibit equipment or personal belongings.

#### **Exhibit Hall Hours**

Exhibits must remain active and open to the public during the following hours:

Wednesday	9:00–10:30 pm
Thursday	11:00 am-5:00 pm 9:00 pm-10:30 pm
Friday	11:00 am—5:00 pm 9:00—10:30 pm (noncommercial only)
Saturday	2:00–4:00 pm (noncommercial only) 9:00–10:30 pm

Noncommercial booths may open during scheduled Sabbath hours, but commercial booths must remain closed, with items for sale covered or placed out of sight. Commercial exhibits will close at 5:00 p.m. Friday and reopen at 9:00 p.m. Saturday.

#### **Exhibit Specifications**

Each exhibit space includes:

0' v 10' apaga /avhihit hall ia

8' x 10' space (exhibit hall is not carpeted)

Draped sides (3' high) and draped back (8' high)

One 8' skirted table

Two folding chairs and one wastebasket

One 7"x 44" single line identification sign

One electrical outlet\*

\*Electricity must be ordered using the Exhibitor Packet available at www.ASIministries.org. A bill will be delivered to your booth on Saturday night, if electricity has been used, whether or not electricity was ordered.

# **Exhibitor Registration**

Please type or print cle	early, as th	nis information will ap	pear on your	identification badge.
Exhibiting Organization (as	it should ap	opear in the convention pr	ogram)	
Contact Person (as it shou	d appear in	the convention program)		
Street/P.O. Box				
City	Sta	te/Province	Zip/Postal Code	Country
Business Phone	On-site	e Cell Phone	E-mail of Conta	ct Person
Complimentary Assistants	(one per 8' :	x 10' exhibit space, free re	egistration, meal	s not included)
Additional Assistants (atte	ndee rates	meals not included, add a	dditional pages i	f necessary)
·			, ,	,,
REGISTRATION	FEES	ASI MEMBER Advanced On-site	NON-N Advanced	IEMBER On-site
Quad Space		\$2,585 🗆 \$2,845 🗀	\$3,060 🗆	\$3,365 🗆 =
End Cap Space		\$1,340 🗌 \$1,475 🔲	\$1,590 🗌	\$1,750 🗌 =
Primary Space		\$770 🗌 \$845 🔲	\$915 □	\$1,005 🗌 =
Additional Space	x	\$465 🗌 \$510 🔲	\$575 🗆	\$635 🗌 =
				TOTAL \$
*Includes one Meal Packet and	d one assistar	nt registration (meals not inclu	uded).	
MEAL OPTION	S	CHILD (3-12)	ADUL	Г/ <b>YOUTH</b> (13+)
Meal Packet (7 Mea	ls) Qty:	x \$110 =	Qty:	_ x \$175 =
Thursday Breakfast		x \$13 =	-	x \$22 =
Thursday Supper	•	x \$18 =	·	x \$30 =
Friday Breakfast		x \$13 =		x \$22 =
Friday Supper	•	x \$18 =	*	x \$30 =

We understand that leased booth spaces are for our use only and not to be sublet or shared with another person or entity.

TOTAL \$

Oty: \_\_\_\_\_ x \$13 = \_\_\_\_

Qty: \_\_\_\_\_ x \$18 = \_\_\_\_

Qty: \_\_\_\_\_ x \$18 = \_\_\_\_

Oty: \_\_\_\_\_ x \$22 = \_\_\_\_

Oty: \_\_\_\_\_ x \$30 = \_\_\_\_

TOTAL \$\_\_\_

Oty: \_\_\_\_\_ x \$30 = \_\_\_

- We agree not to engage in commercial or secular activities during Sabbath hours.
- We will promote a positive and supportive position toward ASI and the SDA Church.
- We understand that solicitation of financial donations is limited to the Exhibit Hall.
- 6 We understand that distribution of any promotional material is limited to the Exhibit Hall.
- We understand that ASI approval of our exhibit application is not an endorsement of our product(s) or service(s).
- We understand that ASI is not responsible for damage or loss to our exhibit or belongings.
- We have read all exhibitor information, requirements, and commitments in this registration form and agree to comply.
- We have read and agree to the ASI Cancellation Policy.

Sabbath Lunch

Sabbath Supper

Sabbath Breakfast

Signed:	Date:
Signed	Date

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#### REGISTRATION TOTAL

TOTAL DUE:	\$
Meal Total (from left):	\$ 
Registration Fees (from left):	\$ 

PAYMENT INFORMATION
□ Check #
(payable to ASI)
☐ Money Order
☐ Credit Card: #
Charge Amount: \$
Expiration Date:
Security Code (3 or 4 digits)
Name as it appears on card:
Billing Address:   Same as above
☐ YES, I will distribute food or drink items as samples. (Approval is required to serve food or drink samples. Please register online.)
□ NO. I will not distribute food or drink

#### Meeting & Event Reservations

items as samples.

To request reservations for board meetings, luncheons, or other special events, visit www.ASIministries.org.

#### Registered and willing to volunteer?

Visit www.ASIministries.org.



12501 Old Columbia Pike, Silver Spring, MD 20904 Phone: 301-680-6450 | Fax: 301-622-5017 E-mail: ASI@nad.adventist.org www.ASIministries.org