

# Registration Form

## 2012 South Dakota Governor's Conference on Tourism

Please complete this registration form and mail it by January 6, 2012, (registrations postmarked after January 6 will incur the late registration rate) along with your pre-registration fee, to: **South Dakota Department of Tourism, 711 E. Wells Ave., Pierre, SD 57501-3369**. Make checks payable to South Dakota Department of Tourism. Payment must accompany registration form. On-line registration, with credit card payment, is available at [www.SDVisit.com](http://www.SDVisit.com). Credit card payment is required at time of on-line registration. All deadlines apply to on-line registration.

Please print or type. Please make copies for each additional registration.

NAME \_\_\_\_\_

BUSINESS/ORGANIZATION \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

CITY/STATE/ZIP \_\_\_\_\_

TELEPHONE \_\_\_\_\_

FAX \_\_\_\_\_

EMAIL \_\_\_\_\_

WEB ADDRESS \_\_\_\_\_

Please check all of your chosen **REGISTRATION** options.

- |   |   |
|---|---|
| <input type="checkbox"/> A. \$75 STUDENT                      | <input type="checkbox"/> E. \$100 WEDNESDAY PARTIAL       |
| <input type="checkbox"/> B. \$150 EARLY BIRD FULL             | <input type="checkbox"/> F. \$100 THURSDAY PARTIAL        |
| <input type="checkbox"/> C. \$200 LATE FULL                   | <input type="checkbox"/> G. \$100 RESERVED BANQUET TABLE  |
| <input type="checkbox"/> D. \$250 ON-SITE FULL                | <input type="checkbox"/> H. \$0 COMPLIMENTARY             |
| <input type="checkbox"/> This is my first Tourism Conference. | <input type="checkbox"/> Dietary request? Please specify. |

Total Enclosed \$ \_\_\_\_\_

# Registration Form

## Visitor Industry Alliance Luncheon

**BEST WESTERN RAMKOTA HOTEL & CONFERENCE CENTER  
WEDNESDAY, JAN. 18, 11 A.M.**

All proceeds from this fund-raising luncheon go to the Visitor Industry Alliance, the statewide advocate for South Dakota's visitor industry. **Cost is \$15 per person**. Pre-registration is requested. To pre-register, return this form, along with a check for \$15 per person, by January 6, 2012 to: **Visitor Industry Alliance, PO Box 1065, Pierre, SD 57501-1065**. Make checks payable to Visitor Industry Alliance.

Please print or type. Please make copies for each additional registration.

NAME \_\_\_\_\_

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MAILING ADDRESS \_\_\_\_\_

CITY/STATE/ZIP \_\_\_\_\_

TELEPHONE \_\_\_\_\_

This event is not included in the cost of the conference registration. Call the Visitor Industry Alliance at 1-877-817-8215 for more information.

Please cut along the dotted line & return to Visitor Industry Alliance.

