

2010 GAMA Trade Show Registration Form

GAMA Trade Show - Knowledge and Community for Game Professionals Bally's Las Vegas - Las Vegas, NV - March 23-26, 2010

Pre-Registration ends March 1, 2010

Business Name:	
Address:	
Phone:	
F-Mail	

Retailer Membership\$125Includes 2 badges and 1buyer ribbon	Distributors Membership \$300 Includes 4 badges and 4 buyer ribbons
Purchase Additional Badges\$75(\$100 onsite)	Purchase AdditionalBadges\$75(\$100 onsite)
Buyer Ribbon \$50 (1 additional buyer ribbon only per retailer membership)	Communicating Membership \$50
NOTE: Each location may have a membership.	Badges \$125 (\$150 onsite – Membership does not include badge)
Buffet Tickets \$25 (tickets are good for breakfast or lo	Number Requested: unch only good any day of the show)

Mayfair Demo Program (Free and Open to Retailers Only)

Session 1 (Tues Breakfast) Session 3 (Wed Lunch) Session 2 (Tues Lunch) Session 4 (Thurs Breakfast)

TOTAL

By submitting this form, I understand that GAMA will not be responsible for any personal injury or lost or misplaced items while I attend GTS 2010. I certify that the information I have provided is true and correct. I authorize GAMA to charge my credit card for the purchase of registration for GTS 2010. The amount charged to the credit card will be adjusted to reflect the accurate total for this registration. There is a \$20 fee on all returned checks. Make checks payable to GAMA.

Sorry NO phone registrations will be accepted. All preregistration forms must be postmarked or faxed by March 1, 2010 to receive preregistration discount. If you need to cancel your registration and request a refund*, you must send us written notification via fax or mail postmarked by March 1, 2010.

*\$20 administration fee will be debited from all refunds.

* Buyers Ribbons will entitle employees to attend special sponsored events during the show. All information given in seminars and discussions should be checked with your financial and business advisors. No one under 18 will be permitted on the show floor.

ATTENDEE INFORMATION: Please fill in the information for all those attending. List any additional attendees on an attached page. RETAILERS: A VALID ID AND A COPY OF YOUR LAST DISTRIBUTOR ORDER MUST BE PRESENTED TO PICK UP BADGES.

Badge One

FAX: 614-255-4499

Name:
Address:
City/State/Zip:
E-Mail:
Badge Two Name:
E-Mail:
Badge Three Name: Address: City/State/Zip: E-Mail:
Badge Four Name:
Address:
City/State/Zip:
E-Mail: Payment Information (Do Not Send Cash) Check Money Order Credit Card CC/Check#
Exp DateSecurity Code
Signature
Name on Card
Tax ID#
Mail or fax form to: GAMA/GTS 280 N. High St., Suite 230 Columbus, OH 43215