



77th Annual NUTSEA CONFERENCE

TRAVERSE CITY · SEPTEMBER 15-18, 2019

REGISTRATION

NAME _____

BADGE NAME _____

TITLE _____

COMPANY ASSOCIATION _____

ADDRESS _____

SPOUSE / GUEST NAME _____

PHONE NUMBER _____

EMAIL ADDRESS _____

EMERGENCY CONTACT NAME & NUMBER _____

☐ JT & S

☐ G & T

☐ DIST & OPER

PLEASE LET US KNOW IF YOU WILL BE ATTENDING THE FOLLOWING ACTIVITIES

☐ VENDOR RECEPTION (SUNDAY) (NUMBER ATTENDING) _____

☐ AWARDS BANQUET / RECEPTION (TUESDAY) (NUMBER ATTENDING) _____

PLEASE INDICATE WHAT YOU WILL ATTEND*

CHOOSE ONE ☐ QUAD STATE BREAKFAST ☐ SAIA BREAKFAST ☐ MEMBER / GUEST BREAKFAST

CHOOSE ONE ☐ NEW MEMBER LUNCHEON ☐ PAST CHAIR LUNCHEON ☐ MEMBER LUNCHEON

*New members for 2019 are strongly encouraged to attend the New Member's Luncheon.

REGISTRATION COST

MEMBER CONFERENCE REGISTRATION

\$550.00 X _____ (number registering) \$ _____

NON-MEMBER CONFERENCE REGISTRATION

\$685.00 X _____ (number registering) \$ _____

SPOUSE / GUEST REGISTRATION (not attending conference - includes 3 breakfasts, reception and banquet)

\$100.00 X _____ (number registering) \$ _____

When attending events, members and guests must wear name badges.

NUTSEA REGISTRATION QUESTIONS:

DONNA CAVANAUGH: 919-671-4496

cavanaughnutsea@outlook.com



NUTSEA
NATIONAL UTILITY TRAINING & SAFETY EDUCATION ASSOCIATION
SAFETY • SKILL • SERVICE



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OUTINGS

SUNDAY OUTINGS (space is limited)

THE CROWN CLUB GOLF OUTING

\$100.00 X _____ (number registering) \$ _____

(price includes transportation, driver gratuity, practice balls, green fees, cart fees, box lunch and two drink tickets)

HANDICAP _____

I REQUEST TO BE TEAMED WITH _____

CLUB RENTALS (per set)

\$25.00 X _____ (number registering) \$ _____

CLUB REQUEST RIGHT X _____ LEFT X _____

LEELANAU PENINSULA WINE TOUR (must be 21 years of age)

\$75.00 X _____ (number registering) \$ _____

(price includes transportation, driver gratuity, wine tasting fees, and box lunch)

NAMES OF ATTENDEES _____

SLEEPING BEAR DUNES TOUR

\$50.00 X _____ (number registering) \$ _____

(price includes transportation, driver gratuity, park fees, and box lunch)

NAMES OF ATTENDEES _____

Donate to Marathon4Kids, based in Traverse City, MI, in the amount of: \$ _____

For more information, visit www.marathon4kids.com

Please make checks payable to NUTSEA

or to pay by credit card, log on to the NUTSEA website and follow the link.

GRAND TOTAL \$ _____

RETURN REGISTRATION FORMS BY MONDAY, SEPTEMBER 2ND TO:

DONNA CAVANAUGH

P.O. BOX 1163 YOUNGSVILLE, NC 27596



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