



TRSA VIRTUAL MARKETING & SALES SUMMIT



Strengthening and Promoting the Linen, Uniform and Facility Services Industry

November 17-18, 2020

4 Easy Ways To Register:

- Online:** www.trsa.org/marketingsummit
- Mail:** 1800 Diagonal Rd, Suite 200, Alexandria, VA 22314

- Email:** registration@trsa.org
- Fax:** 703.519.0026

- Questions?**
877.770.9274

Registrant Information

Name _____

Company _____

Title _____

Address _____

City/State/Zip _____

Telephone _____

Email (required) _____

Check All That Apply:

- EMI Alumni
- CPLM
- Military Veteran
- Attended other TRSA events

Your Organization Level (check all that apply):

- Chairman/CEO/Owner/President
- Professional/Staff
- Vice President/COO/CFO
- Supervisor
- Director
- Staff
- Manager
- Spouse/Family
- Manager/Supervisor
- Not Provided

Your Job Function (select one):

- Administrative
- Customer Service
- Engineering/Maintenance
- Environmental
- Executive Manager
- Finance
- Health and Safety
- Human Resources
- Info Systems Mngt./IT
- Legal
- Logistics and Transportation/Routes
- Marketing
- Production
- Purchasing
- Sales
- Training
- Not Provided

Please share three major challenges you've had in the face of the global pandemic:

1. _____

2. _____

3. _____

Please share three questions that you would like the closing TRSA member panel to address:

1. _____

2. _____

3. _____

Payment

SUPER EARLY REGISTRATION: Through September 25 — Save an additional \$100 by using "market100" at checkout!

	Early (by Oct. 30)	Full Registration (after Oct. 30)
TRSA Operator Member	<input type="checkbox"/> \$345	<input type="checkbox"/> \$395
Non-Member Operator	<input type="checkbox"/> \$545	<input type="checkbox"/> \$595
TRSA Associate Supplier Partner	<input type="checkbox"/> \$345	<input type="checkbox"/> \$395

Group discounts also available; registration@trsa.org for details.

Total \$ _____

- Check Enclosed
- Charge To:
 - Visa
 - MasterCard
 - American Express
 - Discover

Name on Card _____

Signature (must sign in order to charge credit card) _____

Card Number _____

Exp. Date _____ Security Code _____