



# PARK REGISTRATION

## 1. CONTACT INFORMATION

Please fill out all fields clearly. Your badge information will be printed from this form.

Are you a current WWA member?  Yes  No  I'm not sure

**SAVE TIME!**  
Register online at: [wwashow.org](http://wwashow.org)

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Name preferred on badge, if different from above \_\_\_\_\_ Title \_\_\_\_\_

Company name \_\_\_\_\_

Park name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Country \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

E-mail (Receipts and other show-related information will be sent to this address.) \_\_\_\_\_

Please check the box if you'd like to opt in to receive emails from the World Waterpark Association

## 2. FEES

The Virtual Symposium package fees include access to all virtual educational sessions, the daily General Sessions and all chat room time slots taking place over the three day period. This package also includes access for a limited time to session recordings made during the virtual show.

	PACKAGE REGISTRATION	
	Member	Non-Member
Virtual Symposium Package	<input type="checkbox"/> <del>\$449</del> <b>\$249</b>	<input type="checkbox"/> <del>\$624</del> <b>\$424</b>
One Day Virtual Symposium Ticket Please select which day you will attend: <input type="checkbox"/> Oct. 6 <input type="checkbox"/> Oct. 7 <input type="checkbox"/> Oct. 8	<input type="checkbox"/> \$125	<input type="checkbox"/> \$125
Emerging Leaders Virtual Symposium Package*	<input type="checkbox"/> \$79	<input type="checkbox"/> \$79
Displaced Industry Professional Package	<input type="checkbox"/> \$59	<input type="checkbox"/> \$59
<b>SECTION 2 TOTAL: \$</b>		

\*In order to register for this special Emerging Leaders package, you must be under 35 and have less than 5 years in the water leisure industry and be working in a non-managerial position at a seasonal or year-round facility or are a student enrolled in college.

## QUESTIONS?

CALL: +1-913-599-0300 | MON.-FRI. 9 A.M. TO 5 P.M. CST | EMAIL: [CATHY@WATERPARKS.ORG](mailto:CATHY@WATERPARKS.ORG)

### 3. OPTIONAL WORKSHOP

For complete information, visit [WWASHOW.org](http://WWASHOW.org).

- 1. WWA University: Waterpark Design, Development & Expansion Workshop & Reception..... \$75  
October 5, 2020

### 4. ADDITIONAL REGISTRANT

First Name \_\_\_\_\_

Last Name \_\_\_\_\_

Name preferred on badge, if different than above \_\_\_\_\_

Title \_\_\_\_\_

Company Name \_\_\_\_\_

Park Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Fax \_\_\_\_\_

E-mail \_\_\_\_\_

*(Receipts and other show-related information will be sent to this address.)*

#### VIRTUAL FEES

- Virtual Symposium Package
- One Day Virtual Symposium Ticket  
*(please indicate which date)*       Oct. 6       Oct. 7       Oct. 8
- Emerging Leaders Virtual Symposium Package
- Displaced Industry Professional Package
- Optional Events  
*(write in event number and price from section 3)*

**SECTION 4 TOTAL: \$** \_\_\_\_\_

### 5. MEMBERSHIP

Join the WWA and you and anyone employed at your facility or company will receive member pricing on show registration. Current WWA park members must be in good standing at the time of registration to qualify for member pricing. To check your member status, call +1-913-599-0300.

- New       Renewal

#### RATES:

*(WWA Park Membership dues are based on annual attendance.)*

- Prospective Park Developers.....\$439
- Up to 250,000 Annual Attendance .....\$439
- 250,000 or more Annual Attendance .....\$649

### 6. REGISTRATION SUMMARY & PAYMENT

Forms received without payment or check number will be held for payment. If payment covers several registrations, include all forms covered by payment.

#### TOTAL AMOUNT *(by section)*

Fees *(section 2)*      \$ \_\_\_\_\_

Optional Workshops  
& Certifications *(section 3)*      \$ \_\_\_\_\_

Additional Registrant  
*(section 4)*      \$ \_\_\_\_\_

Membership *(section 5)*      \$ \_\_\_\_\_

**GRAND TOTAL**  
*(U.S. FUNDS)*      \$ \_\_\_\_\_

#### METHOD OF PAYMENT *(check one)*

- Credit Card       Company Check

Type of card:

- AMEX     MC     Visa     Discover

\_\_\_\_\_ Credit Card #

\_\_\_\_\_ Exp. Date      \_\_\_\_\_ Security Code

\_\_\_\_\_ Billing zip code

\_\_\_\_\_ Cardholder's name

\_\_\_\_\_ Authorized signature\*

*\*Note: A signature is required in order to complete credit card payment*

### 7. RETURN FORM & FULL PAYMENT

Email: [cathy@waterparks.org](mailto:cathy@waterparks.org)

Mail: World Waterpark Association  
c/o Cathy Haggarty  
8826 Santa Fe Drive, Ste. 310  
Overland Park, KS 66212

Register online at: [WWASHOW.org](http://WWASHOW.org)

