



**THE POWER OF INFLUENCE**  
**NOV. 11-15 | DALLAS-FT. WORTH, TX**

**Instructions:** Please complete all information on this registration form. (If needed, the form may be photocopied for additional registrations.) Form must be complete and accompanied by payment (in U.S. funds only) in order to be processed. Registration received without payment will not be processed. Submit a separate form for each registrant. **(Please print clearly.)**

Name \_\_\_\_\_ PRSA ID \_\_\_\_\_  
(Last) (First) (Optional)

School \_\_\_\_\_

Address \_\_\_\_\_

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

Telephone \_\_\_\_\_

Email \_\_\_\_\_  
(Must complete to receive registration confirmation)

**CHECK APPROPRIATE BOXES**

- PRSA Member
- Nonmember
- I am a first-time attendee at this event
- I am a Chapter President
- I am a District Ambassador
- I am a Nationally Affiliated Student-run Firm Director

Do you have any special needs that will affect your participation? (Dietary, etc.)

\_\_\_\_\_

Emergency Contact (Include name, relationship to you and phone number)

\_\_\_\_\_

Registration Options	SAVER RATE On or Before Sept. 16		STANDARD RATE After Sept. 16	
	Member	Nonmember	Member	Nonmember
In-Person Registration	\$335 <input type="checkbox"/>	\$395 <input type="checkbox"/>	\$350 <input type="checkbox"/>	\$445 <input type="checkbox"/>
<b>Additional Registration Options</b> <small>(Optional)</small>				
Nov. 14, 10:45 AM-12:45 PM   Awards Ceremony Brunch				\$0 <input type="checkbox"/>

**Ways to Register**

- **FAX:** Complete the Registration form and fax; must include credit card information.  
 Fax to **(212) 460-5460**
- **Mail:** Complete registration form and mail; must include credit card information or a check made payable to PRSA ICON2022, in U.S. Funds only.  
**PRSA**  
**411 Lafayette Street, Suite 201**  
**New York, NY 10003**  
**Attn: PRSA ICON2022**
- **Website:** Visit [prsa.org/prssalCON](http://prsa.org/prssalCON) to register online.

**Payment**

**Fee: \$** \_\_\_\_\_

Registrations received without payment will not be processed.

- Check payable in U.S. Funds to PRSA ICON2022
- or  Visa  American Express  Mastercard

Credit Card Number \_\_\_\_\_

Exp. Date \_\_\_\_\_

Signature \_\_\_\_\_

- I agree to pay total amount indicated according to card issuer's agreement.

**Questions? Call (800) 350-0111**

## Registration & Cancellation Policies

I agree to follow all policies and rules set forth by PRSA and/or the conference venue(s) as they are updated from time to time, and to comply with the directions of PRSA and the conference venue(s). I acknowledge that my right to access the conference is strictly subject to such policies, rules, and directions. PRSA reserves the right, in its sole discretion, to remove or refuse entry without refund or liability of any kind to any person (i) who does not comply with any of the policies, rules, or directions governing participation in the conference; (ii) whose participation or behavior disrupts or hinders the enjoyment of the conference by others; or (iii) who breaches these registration terms and conditions.

**Cancellations/Refund Policy:** Refund of the PRSSA 2022 ICON registration fee, less an administrative fee of \$85, will be made if written notice of cancellation is postmarked no later than Oct. 12, 2022. Registrants whose cancellation requests are postmarked (or emailed) after Oct. 12, 2022, will NOT be entitled to a refund. Cancellation of registration for this event must be made in writing and mailed to PRSSA 2022 International Conference, 411 Lafayette Street, Suite 201, New York, NY 10003, Attn: PRSSA 2022 International Conference Registration, or by email to cledesma@pcm411.com. Substitute attendees will be permitted (with appropriate documentation) until Oct. 12, 2022.

**Photography Notice:** Be aware that by participating in PRSA's public forum, "The PRSSA 2022 International Conference," you are automatically authorizing the Public Relations Society of America (hereinafter "PRSA") and its employees, agents and assigns to use your name, photograph, voice or other likeness for purposes related to the mission of PRSA, including but not limited to publicity, marketing, websites, other electronic forms of media, and promotion of PRSA and its various programs.

**Health and Safety Policies:** I will follow all PRSA policies, procedures, and rules as well as any CDC and local public health guidelines to reduce the likelihood of acquiring or spreading of COVID-19.

Due to the nature of COVID-19 and the programs and services offered at the Event, I understand that even if I follow all PRSA policies, procedures, and rules as well as any CDC and local public health guidelines to reduce the likelihood of acquiring or spreading of COVID-19, I may be exposed to COVID-19 and I may contract COVID-19 through participation in PRSA's Event.

I AGREE AND ACKNOWLEDGE THAT MY ATTENDANCE, PARTICIPATION IN, AND TRAVEL FOR PRSA'S EVENT IS COMPLETELY VOLUNTARY. I AGREE TO ASSUME AND ACCEPT SOLE RESPONSIBILITY FOR ALL KNOWN AND UNKNOWN RISKS OF LOSS, PERSONAL INJURY, ILLNESS, OR DEATH RELATED TO EXPOSURE TO COVID-19, WHETHER BEFORE, DURING, OR AFTER THE EVENT, EVEN IF RESULTING FROM THE ACTS, OMISSIONS, OR NEGLIGENCE OF PRSA, ITS EMPLOYEES, VOLUNTEERS, OTHER PARTICIPANTS, CONTRACTORS, REPRESENTATIVES, OR ANY LESSORS AND OWNERS OF PREMISES USED TO CONDUCT THE EVENT ("RELEASEES"), TO THE FULLEST EXTENT PERMITTED BY LAW.

I HEREBY RELEASE, COVENANT NOT TO SUE, DISCHARGE AND HOLD HARMLESS THE RELEASEES WITH RESPECT TO ANY AND ALL LIABILITIES, CLAIMS, PENALTIES, SUITS, DEMANDS, JUDGMENTS, COSTS, INTERESTS AND EXPENSES (INCLUDING ATTORNEYS' FEES AND COSTS) ARISING FROM OR RELATING TO THE PERSONAL INJURY, ILLNESS, OR DEATH OF MYSELF (OR ANY PERSON WHO MAY CONTRACT COVID-19, DIRECTLY OR INDIRECTLY, FROM ME), WHETHER BEFORE, DURING, OR AFTER THE EVENT, EVEN IF RESULTING FROM THE ACTS, OMISSIONS, OR NEGLIGENCE OF ANY OF THE RELEASEES, TO THE FULLEST EXTENT PERMITTED BY LAW.

By checking this box, I agree with the Registration & Cancellation Policies noted above.