



2018 Pest Alliance & Annual Meeting

Wednesday - Thursday, December 5 & 6, 2018
Wyndham San Antonio Riverwalk Hotel, San Antonio, TX

Schedule of Events (Tentative)

Wednesday, December 5, 2018

6:00pm – 7:30pm Welcome Reception: Hotel Patio on the Riverwalk (*weather permitting*)

Thursday, December 6, 2018

7:00am - 8:00am Past President's Breakfast, Hotel Restaurant: *Reserved Seating*

8:00am - 8:30am Continental Breakfast for all attendees & Exhibits Open

8:30am – 9:30am Managing Difficult Employment Issues

9:30am - 10:30am 5 Lead Magnet Ideas to Supercharge Your 2019 Web Marketing Strategy

10:30am - 11:00am *Break*

11:00am - 12:00pm The Challenges of Customer Retention in the Modern Age

12:00pm - 1:30pm Luncheon, Annual Meeting, Installation of Officers/Directors and Award Ceremony

1:30pm - 4:30pm Board of Directors Meeting

4:30pm Program Ends

Wyndham San Antonio Riverwalk Hotel, 111 E. Pecan St., San Antonio, TX 78205. Phone: 210-354-2800

Call the hotel and tell them you are with the Texas Pest Control Association room block to receive the discounted room rate of \$159 plus tax. *Cut off for the discounted hotel rate is Tuesday, November 6, 2018.* Check in is 3:00pm, check out is 11am. Parking: \$32 for valet + tax, and \$25 self-parking per vehicle per day in and out.

REGISTRATION FORM – December 5 & 6, 2018 – San Antonio, TX

Name(s): _____

Company: _____

Address: _____ City: _____ ST: _____ Zip: _____

Phone: _____ Email: _____

Circle One

Registration Fee

Register By 11/21

\$95 per person

Register After 11/21 & On-Site

\$125 per person

Guest Social Ticket

\$40 per person

\$70 per person

(Guest ticket includes reception & lunch)

Attending Welcome Reception YES or NO

PAYMENT INFORMATION:

Check or Money Order - Payable to TPCA. Fax your registration form to 512-852-6772 and mail your payment and form to: TPCA, P.O. Box 1684, Austin, TX 78767. **Payment MUST be received by 11/21/18 to avoid the \$30 late fee charge. Cancellations received after 11/21/18 will be charged a \$25 cancellation fee.**

Credit Card (Fax this form to TPCA - 512-852-6772) **Check One:** Visa MasterCard Discover AMEX

Card #: _____ Exp Date: _____ Security Code: _____ Total Amount: _____

Print Name on Card: _____ Signature: _____

Billing Address: _____ City: _____ Zip: _____