

NOVEMBER 2-4, 2016 / DISNEY'S YACHT CLUB RESORT / LAKE BUENA VISTA, FLORIDA / THETMAANNUAL.ORG

Please submit completed forms to [conferences@turnaround.org](mailto:conferences@turnaround.org), otherwise you must register online at [thetmaannual.org](http://thetmaannual.org) or onsite.

## Attendee Information

Full name \_\_\_\_\_ Goes by/nickname (for badge) \_\_\_\_\_

Company \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Birth year: \_\_\_\_\_ Gender:  Male  Female

Choose which best describes your area of specialty (**choose only one** – this will be indicated on your name badge, attendee list, and conference app profile to help facilitate networking):

- |  |  |   |   |
|--|--|---|---|
| <input type="checkbox"/> Turnaround Consultant | <input type="checkbox"/> Judge Lender              | <input type="checkbox"/> Investment Banker Liquidator | <input type="checkbox"/> Academic Media |
| <input type="checkbox"/> Financial Advisor     | <input type="checkbox"/> Investor/Capital Provider | <input type="checkbox"/> Appraiser                    | <input type="checkbox"/> Other          |
| <input type="checkbox"/> Attorney              |  | <input type="checkbox"/> Government                   |   |

## Special Needs

Please list if you have any special needs or requests below.



\_\_\_\_\_

## CLE Credit

For attorneys claiming CLE credit, please list for which states:

\_\_\_\_\_

## Registration Rates

|                          |   | Early Bird<br>On/before Oct. 7 | Advance<br>Oct. 8 – Nov. 1 | Onsite<br>Nov. 2-4 |
|--------------------------|---|--------------------------------|----------------------------|--------------------|
| <input type="checkbox"/> | <b>Member</b> Promotion code (if applicable) _____  | \$1,195                        | \$1,345                    | \$1,495            |
| <input type="checkbox"/> | <b>Member Group</b><br>5-9 members from the same firm may receive a 15% discount (email <a href="mailto:conferences@turnaround.org">conferences@turnaround.org</a> for promo code). All forms must be submitted together. No other discounts apply. | \$1,015                        | \$1,145                    | \$1,270            |
| <input type="checkbox"/> | <b>Member Group</b><br>10+ members from the same firm may receive a 25% discount (email <a href="mailto:conferences@turnaround.org">conferences@turnaround.org</a> for promo code). All forms must be submitted together. No other discounts apply. | \$895                          | \$1,010                    | \$1,120            |
| <input type="checkbox"/> | <b>NextGen</b><br>Members ages 35 and under. Birth year required. No other discounts apply.   | \$895                          | \$1,020                    | \$1,145            |
| <input type="checkbox"/> | <b>International Member</b><br>Members outside North America. No other discounts apply.   | \$745                          | \$745                      | \$745              |
| <input type="checkbox"/> | <b>Full-time Academic/Government Employee</b><br>Must provide proof of full-time status. No other discounts apply.  | \$550                          | \$675                      | \$800              |
| <input type="checkbox"/> | <b>Non-member</b> Promotion code (if applicable) _____  | \$1,545                        | \$1,695                    | \$1,845            |

Please complete the registration form on the next page.

## Spouse/Guest Registration

Only applicable to non-industry guests, accompanying a registered attendee.

|                          |  |       |
|--------------------------|--|-------|
| <input type="checkbox"/> | <b>Full conference registration</b> (includes Opening Reception on the Beach at Disney's Yacht Club Resort, Fireworks at French Island Reception, attendee lounge, educational, and main stage sessions) | \$695 |
| <input type="checkbox"/> | <b>Events-only registration</b> (includes Opening Reception on the Beach at Disney's Yacht Club Resort, Fireworks at French Island Reception, attendee lounge, main stage sessions)                      | \$495 |
| <input type="checkbox"/> | <b>Receptions-only registration</b> (includes Opening Reception on the Beach at Disney's Yacht Club Resort and Fireworks at French Island Reception)   | \$175 |

Full name \_\_\_\_\_ Goes by/nickname (for badge) \_\_\_\_\_

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

## Event Registration

|                          |   |
|--------------------------|---|
| <input type="checkbox"/> | <b>TMA NOW Reception</b><br>Thursday, November 2            |
| <input type="checkbox"/> | <b>TMA Certification Reception</b><br>Wednesday, November 2 |
| <input type="checkbox"/> | <b>TMA NextGen Reception</b><br>Wednesday, November 3       |
| <input type="checkbox"/> | <b>TMA International Reception</b><br>Thursday, November 3  |
| <input type="checkbox"/> | <b>TMA LGBT Reception</b><br>Thursday, November 3           |

## Networking Activities Registration

- Golf Outing** \$229  
Wednesday, November 2, 1:00 p.m.  
Handicap: \_\_\_\_\_  
Pairing Request: \_\_\_\_\_
- Cocktails and Cuisine** \$109  
Thursday, November 3, 4:30 p.m. – 6:30 p.m.
- Business Behind the Magic** \$149  
Thursday, November 3, 4:30 p.m. – 6:30 p.m.
- Inaugural TMA 5K Run/Walk** \$30/\$40 on-site  
Thursday, November 3, 6:00 a.m. Registration  
T-shirt size: \_\_\_\_\_
- Note:** Registered Spouse/Guests may register for networking activities for additional fee

## Payment

Completion of this form implies understanding of and compliance with TMA's registration policies as detailed in the conference brochure and on [thetmaannual.org](http://thetmaannual.org).

|   |                     |
|---|---------------------|
| Total due: _____ (All prices are in USD)  |                     |
| <b>Pay by Check</b><br>Payable in U.S. funds to Turnaround Management Association   |                     |
| <input type="checkbox"/> Check number: _____  |                     |
| <b>Pay by Credit Card</b> <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> American Express |                     |
| Credit card number _____  |                     |
| Expiration date _____   | Security code _____ |
| Name on credit card (please print) _____  |                     |
| Signature _____   |                     |

## Questions

Registration questions may be directed to [conferences@turnaround.org](mailto:conferences@turnaround.org) or 312-578-6900.

### Video and Photographs:

By attending this event, you agree that your voice and/or image may be recorded, used and distributed with the broadcast or other media distribution of this event.

## Submit

Please send completed forms to:  
**conferences@turnaround.org**

Turnaround Management Association  
150 North Wacker Drive, Suite 1900  
Chicago, IL 60606

Fax: 312-578-8336



Participant Information

First Name: \_\_\_\_\_ M.I. \_\_\_\_\_ Last Name: \_\_\_\_\_

DOB: \_\_\_\_\_ Gender: \_\_\_\_\_ Emergency Phone Number: \_\_\_\_\_ Team Name: \_\_\_\_\_  
(MM/DD/YYYY) (M/F)

Event Information

Name of Event: \_\_\_\_\_ Event Date: \_\_\_\_\_

Event Host: \_\_\_\_\_

Activity(ies): \_\_\_\_\_

TERMS AND CONDITIONS OF PARTICIPATION - READ CAREFULLY BEFORE SIGNING

In consideration of my being permitted to participate in the Event and activities referenced above (collectively, the "Event/Activity"), wherever the Event/Activity may occur, I hereby attest that, after reading this Sports Waiver and Permission Form completely and carefully, I acknowledge that my participation in the Event/Activity is entirely voluntary, and I further understand and agree as follows:

**ASSUMPTION OF RISK/LIABILITY RELEASE AND INDEMNITY:** I understand that incidental to my participation in the Event/Activity, I may be engaging in activities that involve the risk of serious personal injury, illness, permanent disability, dismemberment, and death, and that such participation may also involve the risk of severe economic and property loss and damage. I understand that these risks may result from the actions, negligence and failure to act of myself and others (including, but not limited, to other individuals in attendance at the Event/Activity to and the Released Parties, as defined below) and from the condition of any property, facilities or equipment used. I also understand that there may be risks involved that are not known to me or to the Released Parties, and may not be foreseen or reasonably foreseeable by any of us at this time or at the time of the Event/Activity. I agree to assume all of the foregoing risks, which risks may include, among other things, muscle injuries and broken bones, as well as the risk of any negligence by other participants or by the Released Parties, and the risk of injury caused by the condition of any property, facilities or equipment used during the Event/Activity, and accept personal responsibility for any injury (including, but not limited to, personal injury, disability, dismemberment and death), illness, damage, loss, claim, liability, or expense, of any kind or nature, that I or my property may suffer arising out of or in connection with my participation in the Event/Activity. On my own behalf, and on behalf of my heirs, executors, administrators and next of kin, I hereby release, covenant not to sue, and forever discharge the Released Parties of and from all liabilities, claims, actions, damages, costs or expenses of any nature ("Claims") arising out of or in any way connected with my participation in the Event/Activity, and further agree to indemnify and hold each Released Parties harmless from and against any and all such Claims including but not limited to, all attorneys' fees and disbursements through and including any appeal. I understand that this release and indemnity includes any Claims based on negligence, action or inaction of any of the Released Parties and covers bodily injury (including death), property damage and loss by theft or otherwise, whether suffered by me before, during or after such participation. For the purposes hereof, the "Released Parties" are Walt Disney World Resort, a division of Walt Disney Parks and Resorts U.S., Inc., Disney Destinations, LLC, ESPN, Inc. and their respective parent subsidiary and other affiliated or related companies (the "Disney Companies"); the Event Host, all Event sponsors and charities having a presence at the Event/Activity, the sponsors of the Disney Companies, Event contractors, and their respective parent, subsidiary, affiliated or related companies; Reedy Creek Improvement District and its Board of Supervisors; and the officers, directors, employees, agents, contractors, sub-contractors, representatives, successors, assigns, and volunteers of each of the foregoing entities.

**PHYSICAL CONDITION/MEDICAL AUTHORIZATION:** I hereby certify that I am physically fit for participation in the Event/Activity, have the skill level required in connection with the Event/Activity, and have not been advised otherwise. I agree that before I participate in the Event/Activity, I will inspect all related facilities and equipment. In connection with any injury sustained or illness or medical conditions experienced during my attendance in connection with the Event/Activity, I authorize any emergency first aid, medication, medical treatment or surgery deemed necessary by the attending medical personnel if I am not able to act on my own behalf. Additionally, I authorize medical treatment for me, at my cost, if the need arises; however, I acknowledge that the Released Parties shall have no duty, obligation or liability arising out of the provision of, or failure to provide, medical treatment.

**EQUIPMENT AND FACILITIES INSPECTION:** I will immediately advise the Event manager of any unsafe condition that I observe, and will refuse to participate in the Event/Activity until all unsafe conditions observed by me have been remedied.

**PUBLICITY RIGHTS:** I further grant the Released Parties the right to photograph, record and/or videotape me and further to display, edit, use and/or otherwise exploit my name, face, likeness, Event/Activity results and standings (as more fully described below), voice, and appearance, in all media, whether now known or hereafter devised, (including, without limitation, in computer or other device applications, online webcasts, television programming (including broadcast on ESPN platforms), in motion pictures, films, newspapers, and magazines) and in all forms including, without limitation, digitized images or video, throughout the universe in perpetuity, whether for advertising, publicity, or promotional purposes, including, without limitation, publication and use of Event/Activity result and standings (including but not limited to name, bib number, if applicable, age, times, if applicable, gender, "hometown", or other standard Event/Activity results) without compensation, residual obligations, reservation or limitation, or further approval, and I agree to indemnify and hold harmless the Released Parties for any Claims associated with such grant and right to use. The Released Parties are, however, under no obligation to exercise any rights granted herein.

**GOVERNING LAW:** This Waiver and Permission Form will be governed by the laws of the State of Florida, and any legal action relating to or arising out of this Waiver and Permission Form will be commenced exclusively in the Circuit Court of the Ninth Judicial Circuit in and for Orange County, Florida (or if such Circuit Court will not have jurisdiction over the subject matter thereof, then to such other court sitting in such county and having subject matter jurisdiction), AND I SPECIFICALLY WAIVE THE RIGHT TO TRIAL BY JURY.

\_\_\_\_\_ Date

\_\_\_\_\_ Signature

\_\_\_\_\_ Print Name