



# REGISTRATION FORM

Visit our website for more information and to REGISTER ONLINE! [TRI STATE OF MIND.COM](http://TRI STATE OF MIND.COM)



## THURSDAY & FRIDAY, October 24 & 25, 2019

**Thursday** | Dick Brothers Brewery  
5:00 pm Networking, Tours & Appetizers  
**Friday** | Oakley Lindsay Center  
9:00 am - 3:00 pm Summit



## INNOVATION THROUGH COLLABORATION

With everything we have accomplished in the last 20+ years, we know our Tri-State area is stronger together. Especially as we transform our region by finding Innovation Through Collaboration. We recognize leadership in Summit Task Forces and celebrate achievement by presenting the Innovation Awards. Speakers will be announced on the Summit website in the coming weeks.

### OAKLEY LINDSAY CENTER Quincy, Illinois

Friday, October 25:  
8:00 am **Registration & Refreshments**  
9:00 am **Morning Session** *Connectivity*  
Noon **Networking Lunch**  
1:00 pm **Afternoon Session & Recognition**  
*Workforce & Lobbying*

COST: **\$45 per person** (includes lunch + Thurs. networking)

DEADLINE: **Friday, October 18, 2019**  
(Advance registration is required.)

Mail this registration form and payment to:  
**Tri-State Development Summit**  
300 Civic Center Plaza, Suite 256 · Quincy, IL 62301

For more information, contact the Tri-State Development Summit at Great River Economic Development Foundation:  
**217.223.4313 | info@tristateofmind.com.**

### ATTENDEE

Name \_\_\_\_\_

*Please type or print your name as it should appear on badge.*

Title(s) \_\_\_\_\_

Company or Organization \_\_\_\_\_

Address 1 \_\_\_\_\_

Address 2 \_\_\_\_\_

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

Phone \_\_\_\_\_

Email \_\_\_\_\_

### ADDITIONAL ATTENDEES

Name \_\_\_\_\_

Name \_\_\_\_\_

Name \_\_\_\_\_

Please indicate any special accommodations: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### METHOD OF PAYMENT

Number attending \_\_\_\_\_ x \$45 per person (*nonrefundable, includes lunch + Thurs.*) = \$ \_\_\_\_\_

Number attending \_\_\_\_\_ Thursday, Networking & Tours

*Payment in full is expected upon registration. Please use this registration form as your invoice.*

**CHECK** *Make check payable to Tri-State Development Summit*

**CREDIT CARD**  Visa  Master Card  Discover  American Express

Cardholder Name \_\_\_\_\_

Card Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Expiration Date \_\_\_\_\_ / \_\_\_\_\_ CCV Code (3-4 Digit number on the back of card) \_\_\_\_\_

**BILLING ADDRESS**  Same as Above  New Address

Address \_\_\_\_\_

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

Country \_\_\_\_\_

Signature \_\_\_\_\_