



# 2024 WSBA Convention and Trade Show

June 17-19

Radisson Hotel

200 Harborview Plaza \* LaCrosse, WI 54601

**Room Reservations: 608.784.6680**

**Rates:** King: \$131; 2 Queen: \$141

**Room cutoff date: May 27 – Rooms cannot be guaranteed after this date**

**Check-in: 3:00 pm    Check-out: 12:00 pm**

## CONVENTION REGISTRATION FORM

### REGISTRATION FEES

Early Bird rates until May 31

Full Rate (Mon-Wed) \$250	Golf \$150	Monday only \$100	Tue or Wed only \$175	Wed. Evening Pizza Boat Cruise (8-9:30pm) Adult: \$30 - Child (1-11): \$20
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Rates after May 31

Full Rate \$299	Golf \$200	Monday only \$150	Tue or Wed only \$200	<span style="color: red;">Registration after June 12 incurs a Late Fee</span>
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Choose the registration fee types for each attendee and enter the total for that person.

**Note:** Golf and Wednesday Trip are separate and must be registered **in addition to** any other day fee(s).

Send golf group names to [Cherie@wi-sba.org](mailto:Cherie@wi-sba.org) by June 12<sup>th</sup>.

### Attendee(s) Registration (use a separate sheet if needed)

<b>Name:</b>	___ Full Rate ___ Mon ___ Tue. ___ Wed. ___ Golf ___ Wed Eve	<b>Total:</b>
<b>Name:</b>	___ Full Rate ___ Mon ___ Tue. ___ Wed. ___ Golf ___ Wed Eve	<b>Total:</b>
<b>Name:</b>	___ Full Rate ___ Mon ___ Tue. ___ Wed. ___ Golf ___ Wed Eve	<b>Total:</b>
<b>Name:</b>	___ Full Rate ___ Mon ___ Tue. ___ Wed. ___ Golf ___ Wed Eve	<b>Total:</b>
<b>Name:</b>	___ Full Rate ___ Mon ___ Tue. ___ Wed. ___ Golf ___ Wed Eve	<b>Total:</b>
<b>Name:</b>	___ Full Rate ___ Mon ___ Tue. ___ Wed. ___ Golf ___ Wed Eve	<b>Total:</b>
<b>Name:</b>	___ Full Rate ___ Mon ___ Tue. ___ Wed. ___ Golf ___ Wed Eve	<b>Total:</b>

<b>Name:</b>	___ Full Rate ___ Mon ___ Tue. ___ Wed. ___ Golf ___ Wed Eve	<b>Total:</b>
<b>Name:</b>	___ Full Rate ___ Mon ___ Tue. ___ Wed. ___ Golf ___ Wed Eve	<b>Total:</b>
	<b>Total all Fees:</b>	

<b>Organization:</b>		<b>Phone:</b>	
<b>Contact Person:</b>		<b>Email:</b>	
<b>Address:</b>		<b>City:</b>	<b>State:      Zip:</b>
<b>Payment options:</b> ___ Check enclosed ___ Charge credit card (may also be paid online at the Convention Registration page)		<b>Credit Card information:</b> Card # _____ Exp _____    Sec Code _____	

**Refunds not available after May 31, 2024.**

**SEND TO:**  
**WISCONSIN SCHOOL BUS ASSOCIATION**  
**3980 RIVER RD \* WISCONSIN DELLS, WI 53965**  
**PHONE: 608.514.5470 \* EMAIL: [Cherie@wi-sba.org](mailto:Cherie@wi-sba.org) \* [www.wi-sba.org](http://www.wi-sba.org)**