

# TOPS' 2010 International Recognition Days

Halifax, Nova Scotia • July 15, 16 & 17, 2010



## Registration Information

- Everyone attending International Recognition Days (IRD) must send in the form below (family members and friends may also register on this form). You must register in order to participate in any IRD event or attend any IRD session.
- All reservations for the official IRD hotel *must* be made by means of the housing form on page 41 or the TOPS website ([www.tops.org](http://www.tops.org)). **Do not send your reservations to TOPS Club, Inc.** Reservations must be received by Globetrotter Travel by June 15, 2010.
- IRD registration deadline is May 10, 2010. Registration fee to that date is \$50 (U.S. funds). Late registration fee is \$65. There will be a \$5 charge for any replacement badge issued.
- Please allow 4 to 6 weeks to receive your official name badge(s) and tour information forms. First mailing, January 2.
- Any registration received after June 15 will not be mailed but will be held at the IRD Registration Desk at the Headquarters Hotel (the Halifax Marriott Harbourfront) for pickup.
- **ABSOLUTELY NO REFUNDS.**
- Print clearly. Enclose admission fee for each person registered. All members are required to pay with U.S. funds. Copy form as needed for additional members registering.
- Please **make payment payable to TOPS Club, Inc.**

### NOTE:

A valid U.S. passport is required for entry into Canada and return to the U.S.

- Mail payment and registration form (including completed mailing label at bottom of form) to TOPS Club, Inc., at the address on form.
- **IRD CHARM:** Order your official IRD charm(s) (\$4 each, U.S. funds) using the form below. The charm(s) will be mailed with your name badge(s) and tour information. Charm will be designed to match the 2010 IRD logo theme.

### IMPORTANT!

The registration form below is for admission to IRD *only*. It should not be confused with registration for participation in the Before and After Parade, KOPS program, or Century Award recognition. You can register for these events on the 2010 IRD Events Entry form that you will find in the February 2010 *TOPS News* or at [www.tops.org](http://www.tops.org) in the IRD section. Also, the IRD Events Entry form will be mailed to you with your name badge.

Use this form, or photocopy it, or download it from [www.tops.org](http://www.tops.org). Mail to address on form.  
Or, you may register in the TOPS Store at [www.tops.org](http://www.tops.org) after January 1.

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## TOPS CLUB, INC. 2010 IRD REGISTRATION FORM

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Date \_\_\_\_\_

Chapter: **TOPS #** \_\_\_\_\_, \_\_\_\_\_ (city)  
(state/prov) (number)

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

**Mail form and payment to:**  
**TOPS Club, Inc. Attn: IRD Registration**  
**P.O. Box 070360**  
**Milwaukee WI 53207-0360**

### MEMBERS AND GUESTS ATTENDING:

1. Name \_\_\_\_\_ (first) \_\_\_\_\_ (last)

2. Name \_\_\_\_\_ (first) \_\_\_\_\_ (last)

3. Name \_\_\_\_\_ (first) \_\_\_\_\_ (last)

4. Name \_\_\_\_\_ (first) \_\_\_\_\_ (last)

### BOARD MEMBERS, REGIONAL DIRECTORS, RETREAT STAFF, COORDINATORS, AREA CAPTAINS, AND TOPS AMBASSADORS REGISTER BELOW:

Name \_\_\_\_\_ (first) \_\_\_\_\_ (last)

Title \_\_\_\_\_

*Special needs? If you have a disability\* that has special requirements, please provide the following information:*

Nature of disability \_\_\_\_\_  Check box if you are using a wheelchair or motorized cart

Name \_\_\_\_\_ Phone \_\_\_\_\_

Mailing address \_\_\_\_\_

City \_\_\_\_\_ State or Province \_\_\_\_\_

ZIP or Postal code \_\_\_\_\_ Country \_\_\_\_\_

\* If you require a caregiver, please make your own arrangements.

\_\_\_\_\_ IRD charm(s) @ \$4 each .....\$ \_\_\_\_\_  
(quantity)

Wis. residents add 5.6% sales tax on charms amt. only.....\$ \_\_\_\_\_

\_\_\_\_\_ IRD registrations (to TOPS by May 10) @ \$50 each .....\$ \_\_\_\_\_  
(quantity)

\_\_\_\_\_ IRD registrations (to TOPS after May 10) @ \$65 each .....\$ \_\_\_\_\_  
(quantity)

**TOTAL AMOUNT ENCLOSED (U.S. funds only) .....\$ \_\_\_\_\_**

Fill in mailing label below with address to which registrations are to be sent. Print distinctly or type. (Do not detach label.)

**SHIP TO:**  
 Name \_\_\_\_\_ Memb. # \_\_\_\_\_

Mailing address \_\_\_\_\_

City \_\_\_\_\_ State or Province \_\_\_\_\_ ZIP or Postal code \_\_\_\_\_

Country \_\_\_\_\_

**IMPORTANT!**  
**CUT ALONG DOTTED LINE ONLY. DO NOT CUT UP FORM OR DETACH MAILING LABEL AT RIGHT. Mailing label will be used to send official name badges/charms to you.**