

SELF STORAGE

# VALUATION & ACQUISITION COURSE

MAY 22-24, 2023 | HILTON DENVER CITY CENTER | DENVER, COLORADO

**PRINT CLEARLY OR TYPE** (Copy form for three or more registrants. Send all forms and payment together)

SSA Member Number (if known) \_\_\_\_\_

First Registrant Name \_\_\_\_\_ Badge Nickname \_\_\_\_\_

Title \_\_\_\_\_

Second Registrant Name \_\_\_\_\_ Badge Nickname \_\_\_\_\_

Title \_\_\_\_\_

Company Name \_\_\_\_\_

Address \_\_\_\_\_

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

Phone \_\_\_\_\_ Fax \_\_\_\_\_

**OFFICE EMAIL REQUIRED FOR REGISTRATION CONFIRMATION AND ANY COURSE PRELIMINARY CORRESPONDENCE. PRINT CLEARLY:**

Email (1st registrant) \_\_\_\_\_

Email (2nd registrant) \_\_\_\_\_

### SSA MEMBERS & AFFILIATE MEMBERS

Payment Received*	By 4/21/23	After 4/21/23
<input type="checkbox"/> First Registrant	\$1,500	\$1,650
<input type="checkbox"/> Second Registrant (same company)	\$1,400	\$1,550

Total\*: \$ \_\_\_\_\_

### ALL OTHERS

Payment Received*	By 4/21/23	After 4/21/23
<input type="checkbox"/> First Registrant	\$1,900	\$2,050
<input type="checkbox"/> Second Registrant (same company)	\$1,800	\$1,950

Total\*: \$ \_\_\_\_\_

\* SSA reserves the right to charge the correct amount if different from the amount listed above.

Please check here if you are disabled and require special services; attach a description of your needs.

**PAYMENT:** Registration and program seating reservation will not be processed without full payment. Enclose a check payable to SSA in U.S. funds, or credit card information.

Visa     MasterCard     American Express    CVV \_\_\_\_\_    Billing Zip \_\_\_\_\_

Card # \_\_\_\_\_    Exp Date \_\_\_\_\_

Cardholder's Name (print) \_\_\_\_\_

Signature \_\_\_\_\_

**CANCELLATION POLICY:** If you are unable to attend, you may substitute a person from your company. Cancellations faxed or postmarked by April 21, 2023 will be subject to a \$200 processing fee per registrant, with the remainder refunded. For cancellations between April 21 and May 22, 2023, a 50% refund will be made. No refunds granted thereafter, but substitutions are accepted.

**TO REGISTER:** Email your registration form to [gstengel@selfstorage.org](mailto:gstengel@selfstorage.org), fax with credit card information to SSA at 703-575-8901 or mail registration form with check to Self Storage Association, 1001 North Fairfax Street, Suite 505, Alexandria, VA 22314

**ADDITIONAL INFORMATION:** (703) 575-8000 ext. 111 | [education@selfstorage.org](mailto:education@selfstorage.org) | [selfstorage.org](http://selfstorage.org)