

INFORMATION SHEET

Sheraton Austin Georgetown Hotel & Conference Center

Wednesday, October 2 – Friday, October 4, 2024

SCHEDULE OF EVENTS

Wednesday, October 2

- *DPC of Texas Golf Tournament*
See website for registration
- *Summit Workshops*
 - Competent Person Investigation - **\$150**
8:30 AM – 4:30 PM
 - Damage Investigation Training Workshop - **\$150**
8:30 AM – 12:30 PM
 - Ground Penetrating Radar Training - **\$150**
1:00 PM – 5:00 PM
 - Utility Locator Training Workshop - **\$250**
8:30 AM – 4:30 PM
 - Utility Mapping with GIS Training - **\$150**
8:30 AM – 12:30 PM
- *Summit Reception* – included in registration of any of the Summit events
 - 5:30 PM – 7:00 PM

Thursday, October 3 – Friday, October 4

- *Summit Sessions* – Registration
 - **\$259** (Early)
 - **\$299** (after 8/7/24)
 - **\$349** (after 9/12/24)Includes entry to all sessions, Exhibit Hall, lunch and receptions.
Workshops are not included.

Hotel Room Reservations

Reservations must be made by **Tuesday, September 10, 2024**, to receive this rate.

Hotel Rooms: starting at \$179/night.

For reservations call: (800) 477-3340.

Group name: TX811 Damage Prevention Summit

[Available Rooms - Sheraton Austin Georgetown Hotel & Conference Center](#)



Attendee Registration

Sheraton Austin Georgetown Hotel & Conference Center

Wednesday, October 2 – Friday, October 4, 2024

Primary Contact: _____	Title: _____
Company: _____	
Mailing Address: _____	
City, State, ZIP: _____	
Work Phone: _____	Email: _____

Attendee Names	Summit (\$259 / \$299 / \$349)	Competent Person Training (\$150)	Damage Investigation Training (\$150)	Ground Penetrating Radar Training (\$150)	Utility Locator Training (\$250)	Utility Mapping with GIS Training (\$150)	Amount Due
Early Bird	\$259.00						
Regular (After 8/7/24)	\$299.00						
Late/On Site (After 9/12/24)	\$349.00						
Name							
Name							
Name							
Name							
Total Amount Due							\$

Payment Information: <input type="checkbox"/> Charge credit card below <input type="checkbox"/> Send me an invoice	
<input type="checkbox"/> Visa <input type="checkbox"/> Mastercard <input type="checkbox"/> Discover <input type="checkbox"/> American Express	
Card#	
Sec #	Exp. Date:
Name on Card:	
Cards Billing Address:	
Amount Charged:	Signature:

Make Checks Payable To:

ACTS
PO Box 644
Conway, AR 72033

Canceling before 9/2/24 will receive a refund, less a non-refundable \$100 deposit. No refunds will be issued after this date.

Charge will show as ACTS NOW on statement.