



2023 ANNUAL MEETING

SEPTEMBER 10-12, 2023
HYNES CONVENTION CENTER | BOSTON, MA | #IPOAM23



IPO Member Group Discount Form

Any IPO member organization sending 5 or more employees to attend the annual meeting will receive a rate of \$750 per registrant. Complimentary registrations do not count towards the 5 minimum required to receive this discount. *No other discounts apply. The group discount is not transferable to another individual or organization not employed with the organization listed below.*

Select **ONE** of the registration options below for the group:

_____ **Organization contact will collect and provide a list of names to IPO to be registered together.**
See page 3 for Group Attendee Form. Only enter their address if it is different than the Contact's address below.

_____ **Organization's employees will register themselves individually.**
Contact will receive a group discount code to distribute to their organization. If the minimum of 5 paying registrants is not met by **September 8, 2023**, then all the organization's current attendees will be charged an additional \$350 per person (a total of \$1,100 per person/IPO member rate) to the credit card listed below.

CONTACT NAME: _____

TITLE: _____

ORGANIZATION: _____

ADDRESS: _____

E-MAIL: _____

PHONE: _____

The contact named above agrees to register a minimum of 5 or more paying registrants for IPO's Annual Meeting at the Hynes Convention Center in Boston, MA (September 10-12, 2023).

Method of Payment (Wire/EFT option available):

Credit Card (Enter: AMEX, Discover, MasterCard, Visa): _____

Credit Card # _____

Exp. Date _____ Security Code: _____

Cardholder Name (print) _____

Signature _____ Date _____

Registration Fees:

- **IPO Member:** \$1,100.00 by July 31; \$1,300 by September 8, and \$1,500 on-site in Boston.
- **Non-member:** \$2,200 by July 31; \$2,500 by September 8, and \$3,000 on-site in Boston.
- **Government/Academic/Emeritus:** \$550.00 by July 31; \$650 by September 8, and \$750 on-site in Boston. *(no other discount applies)*
- **IPO Member Group Discount:** Any IPO member organization sending 5 or more employees to attend the annual meeting will receive a rate of \$750 per registrant. Complimentary registrations do not count towards the 5 minimum required to receive this discount. *No other discounts apply.*

Registration fees include: All education sessions; CLE Credit to applicable states; networking luncheons, breakfasts, and breaks on Monday and Tuesday (Sept. 11-12); Sunday Welcome Reception; Monday Evening Reception, and access to the IP Expo Hall. Guest passes are available at an additional cost. *IPO does not provide a refund if an attendee chooses not to participate in any of the functions included with their registration fees.*

RETURN FORM TO MEETINGS@IPO.ORG

Allow for 1 business day to receive a confirmation email.

By submitting this form, you agree that you have read [IPO's meeting and cancellation policies](#) as noted on our website.

Group Attendee Registration Form

Each attendee must have a unique email address so registrants can receive meeting information & access to materials.

1. NAME _____
TITLE (i.e. *Partner, VP*) _____
FULL ADDRESS _____
E-MAIL _____

2. NAME _____
TITLE (i.e. *Partner, VP*) _____
FULL ADDRESS _____
E-MAIL _____

3. NAME _____
TITLE (i.e. *Partner, VP*) _____
FULL ADDRESS _____
E-MAIL _____

4. NAME _____
TITLE (i.e. *Partner, VP*) _____
FULL ADDRESS _____
E-MAIL _____

5. NAME _____
TITLE (i.e. *Partner, VP*) _____
FULL ADDRESS _____
E-MAIL _____

Additional names (next page)

6. NAME _____
TITLE (i.e. *Partner, VP*) _____
FULL ADDRESS _____
E-MAIL _____

7. NAME _____
TITLE (i.e. *Partner, VP*) _____
FULL ADDRESS _____
E-MAIL _____

8. NAME _____
TITLE (i.e. *Partner, VP*) _____
FULL ADDRESS _____
E-MAIL _____

9. NAME _____
TITLE (i.e. *Partner, VP*) _____
FULL ADDRESS _____
E-MAIL _____

10. NAME _____
TITLE (i.e. *Partner, VP*) _____
FULL ADDRESS _____
E-MAIL _____

By submitting this form, all registrants have agreed to [IPO's meeting policies](#).