

2025 Pick Tennessee Conference Pre-Registration Form

February 13-15, 2025 Franklin, TN

Cool Springs Marriott

700 Cool Springs Blvd.

Franklin, TN 37067

(615) 261-6100

Pre-register by January 31 for early registration rates. Starting February 1st please register at the conference.

ATTENDEE INFORMATION (Use a separate form for each registrant)

Attendee Name: _____

Business Name: _____

Address: _____

City, State, Zip: _____

Work Phone: _____ Fax: _____

E-mail Address: _____ Web Site: _____

(For UT Personnel) – UT Account Number to be charged: _____

REGISTRATION TYPE: _____ Attendee _____ Speaker

Dietary Selection: _____ Standard _____ Vegetarian _____ Gluten Free _____ Dairy Free

Which of the following terms describes your role or interest in attending this conference? (Check all that apply)

- Agritourism Operator
- Fruit and/or Vegetable Producer
- Farmers Market Manager
- Farmers Market Vendor
- Flower/Plant Grower
- Christmas Tree Grower
- Organic Producer
- Grapes/Wine Producer
- Beekeeper
- Industry Partner/Professional (Extension, Agriculture, etc.)

SELECT REGISTRATION, SPECIAL EVENTS & MEMBERSHIP OPTIONS:

I. **REGISTRATION FEE:** Early registration rates are available for registrations completed on or before January 31st. On February 1st registration will increase by \$25. Starting February 1st, please register onsite at the Marriott.

<input type="checkbox"/> Basic Registration Early Registration \$225 Feb 1st registration \$250 Includes access to conference sessions, trade show, Thursday lunch, Thursday evening reception, Friday lunch.	\$
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<p>II. SPECIAL EVENTS: Select optional special events:</p> <p>_____ To help us keep registration costs low and for meal counts, please carefully review the conference program and check which, if any, you will attend. Reservations required.....No Extra Charge</p> <p>_____ Conference Lunch on Thursday, February 13 from 11:30 am-1:00 pm</p> <p>_____ TN Wine Reception on Thursday, February 13 from 5:00 pm-6:00pm</p> <p>_____ Conference Lunch on Friday, February 14 from 11:30am-1:00pm</p>	(√ to Register)
<p>TOTAL</p>	\$

REFUND/CANCELLATION POLICY:

All fees are non-refundable. However, substitutions are welcome at any time. Cancellations and substitutions must be made in writing. E-mail substitution requests to Conferences@utk.edu or mail to: UT Conferences, Attn: Pick TN Conference, P.O. Box 2648, Knoxville, TN 37901-2648. Fax notifications are also accepted to (865) 974-0264.

SELECT A METHOD OF PAYMENT:

_____ **Check (Make payable to the University of Tennessee.)**

_____ **Credit Card**

American Express
 Mastercard
 Discover
 Visa

Cardholder Name: _____

Card Number: _____

CVC # _____ **Expiration Date:** _____

The CVC is a 3 digit code found on the back of your credit card (or a 4 digit code on the front of American Express cards).

Signature: _____

_____ **(UT Personnel) Invoice UT Account #** _____

Send registration forms with payment to: UT Conferences
 Attn: Pick TN Conference
 P.O. Box 2648
 Knoxville, TN 37901-2648

Or fax registration form with credit card payment to (865) 974-0264.

CONFIRMATIONS:
 Electronic confirmations and receipts are emailed once your payment has been fully processed.

Learn more about the conference or register on-line at www.picktnconference.com.
 For registration questions, call (865) 974-0280.