



Specialty Tea
Institute

Scottsdale 2017 STI TEA CERTIFICATION SEMINAR
 STI Tea Certification Courses ~ Levels 1 & 2 in conjunction with the 8th
Annual North American Tea Conference
 Omni Resort & Spa at Montelucia
 4949 E Lincoln Dr, Scottsdale, AZ 85253
 September 11-12, 2017

ATTENDEE REGISTRATION FORM

You may submit your registration any one of the following ways:

- Via Email:** After completing below requested information, save the document to your desktop. Compose an email and attach the saved document. Send to: **ekaraboitis@teausa.org**
- Via Fax:** After completing the below requested information, print this form and fax it to: **(212) 697-8658**.
- Via Postal Mail:** After completing the below requested information, print this form and mail it to:

Tea Association of the USA
 362 Fifth Avenue, Suite 801
 New York, NY 10001

Name				Position			
Tel			Fax			Email	
Company							
Address					City		
State			Zip			Country	
Additional Registrants:							

FEES:	STI MEMBER RATES	NON-STI MEMBER RATES
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*Must Be a Current 2017 STI Member to Register for STI Rate or Apply To Be a Member to Receive Discount!	
<input type="checkbox"/> Level One \$400 per person	<input type="checkbox"/> Level One \$500 per person
<input type="checkbox"/> Level Two \$400 per person	<input type="checkbox"/> Level Two \$500 per person
<input type="checkbox"/> Level One & Two \$675 per person (2 Days)	<input type="checkbox"/> Level One and Two \$875per person (2 Days)

PAYMENT INFORMATION:	STI Member?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
Total Payment:	US \$	Payment Type:	<input type="checkbox"/> Check Enclosed <input type="checkbox"/> Credit Card	
Credit Card Type:	<input type="checkbox"/> Visa	<input type="checkbox"/> MasterCard	<input type="checkbox"/> AMEX	
Credit Card #:	Exp Date:		Month	Year
CVV Number:	Enter the 3 to 4 digit code located on the back signature strip of your credit card. For AMEX, the CVV number is located on the front right, above card number.			
<u>Billing Address of Credit Card if different than address above:</u>				
Name: _____				
Address: _____				
City, State, Zip: _____				
Telephone #: _____				

IF PAYING BY CHECK, PLEASE MAKE CHECK PAYABLE TO: TEA ASSOCIATION OF THE USA

How did you hear about this event (please circle): Our website/ Facebook/Other (please specify)_____

SEMINAR INFORMATION

Foundations of Tea: Level One: **Foundations of Tea: Level Two:**
 Monday, September 11th, 8:00– 5:00PM Tuesday, September 12th, 8:00– 5:00PM

Please visit <http://www.teausa.org/14899/thirstea-for-tea-conference> for additional information on the NA Tea Conference and Travel/Hotel Accommodations.

SPECIALTY TEA INSTITUTE
 362 Fifth Avenue, Suite 801, New York, NY 10001
 Tel: 212-986-0250 / www.teausa.org
Registration Information: Ellainy Karaboitis ~ ekaraboitis@teausa.org