



**Texas Association of Appraisal Districts**  
**41<sup>st</sup> Annual Conference on Appraisal Administration**  
 February 6 - 9, 2022    Gaylord Texan Resort & Conference Center

**Step One - Registration Information**    Name exactly as it should be on badge, use separate form for guest

Full Name \_\_\_\_\_ Nickname \_\_\_\_\_ TDLR # \_\_\_\_\_

Job Title \_\_\_\_\_ Email address \_\_\_\_\_

CAD/Company \_\_\_\_\_ Phone \_\_\_\_\_

Mailing address \_\_\_\_\_

Emergency Contact (name and phone) \_\_\_\_\_

**Step Two – Liability Waiver and signature**

**LIABILITY WAIVER AND RELEASE OF CLAIMS (signature required):**

I acknowledge that I derive personal satisfaction and a benefit by virtue of my participation and/or voluntarism with The Texas Association of Appraisal Districts, and I willingly engage in TAAD events, including the Annual Conference on Appraisal District Operations and/or other activities (the “Activity”).

**RELEASE AND WAIVER.** I HEREBY FREELY AND VOLUNTARILY RELEASE, WAIVE AND FOREVER DISCHARGE ANY AND ALL LIABILITY, CLAIMS, AND DEMANDS OF WHATEVER KIND OR NATURE WHETHER KNOWN OR UNKNOWN, FORSEEN OR UNFORSEEN, AGAINST THE TEXAS ASSOCIATION OF APPRAISAL DISTRICTS AND ITS AFFILIATED PARTNERS AND SPONSORS, INCLUDING IN EACH CASE, WITHOUT LIMITATION, THEIR DIRECTORS, OFFICERS, EMPLOYEES, VOLUNTEERS, AND AGENTS (THE “RELEASED PARTIES”), EITHER IN LAW OR IN EQUITY, TO THE FULLEST EXTENT PERMISSIBLE BY LAW, INCLUDING BUT NOT LIMITED TO DAMAGES OR LOSSES CAUSED BY THE NEGLIGENCE, FAULT OR CONDUCT OF ANY KIND ON THE PART OF THE RELEASED PARTIES, INCLUDING BUT NOT LIMITED TO DEATH, DISEASE, BODILY INJURY, ILLNESS, ECONOMIC LOSS, OR OUT OF POCKET EXPENSES, OR LOSS OR DAMAGE TO PROPERTY, WHICH I, MY HEIRS, ASSIGNEES, NEXT OF KIN AND/OR LEGALLY APPOINTED OR DESIGNATED REPRESENTATIVES, MAY HAVE OR WHICH MAY HEREINAFTER ACCRUE ON MY BEHALF, WHICH ARISE OR MAY HEREAFTER ARISE FROM MY PARTICIPATION WITH THE ACTIVITY.

**ASSUMPTION OF THE RISK.**

I acknowledge and understand the following:

1. Participation includes possible exposure to and illness from infectious diseases including but not limited to COVID-19. While particular rules and personal discipline may reduce this risk, the risk of serious illness and death does exist;
2. I knowingly and freely assume all such risks related to illness and infectious diseases, such as COVID- 19, for myself and my family, even if arising from the negligence or fault of the Released Parties; and
3. I hereby knowingly assume the risk of injury, harm and loss associated with the Activity, including any injury, harm and loss caused by the negligence, fault or conduct of any kind on the part of the Released Parties.

-----  
 Signature

-----  
 Date

**Step Three Registration Fees** (See page 2 for more information.)

Check off <input checked="" type="checkbox"/>		Regular registration postmarked by 01/21/22	Late registration postmarked 01/22/22/after
	TAAD Member Districts ( <i>employees, BOD, ARB</i> )	\$450	\$550
	TAAD Associate OR Affiliate Member	\$550	\$600
	Conference Sponsor or Trade Show Vendor	\$600	\$650
	Nonmember	\$1250	\$1500
	One Day registration(s) *	\$225	\$350

Please indicate day for one-day registration:     Monday     Tuesday     Wednesday

\*One-day registrations DO NOT include social and meal functions.    Tickets must be purchased separately.

**Step Four - Guest Registration / Extra Tickets NO REFUNDS.** (See below for more information.)

# of Tickets	Event	Regular registration postmarked by 01/21/22	Late registration postmarked 01/22/22/and after
	<b>Guest Badge*</b> (for spouse or relative; includes all meals/events, no CEs)	\$300	\$300
	Monday President's Breakfast	\$50	\$50
	Monday Trade Show Lunch	\$35	\$35
	Monday Gala	\$100	\$100
	Tuesday Breakfast	\$50	\$50
	Tuesday Awards Luncheon	\$60	\$60
	Wednesday Farewell Breakfast	\$50	\$50

Name for Guest Badge\* \_\_\_\_\_ **(Guest must also sign waiver)**

**REGISTRATION TOTAL \$** \_\_\_\_\_

*By signing/submitting this form you acknowledge and accept the terms and policies outlined below.*

TAAD Office Use Only	
Date: _____	Amt: _____
Ck #: _____	DB: _____

## REGISTRATION INSTRUCTIONS

### Types of Registration

**Full registration** provides a name badge required for entrance to ALL education sessions and meal and social functions including the Monday President's Breakfast, TAAD Gala on Monday, Monday Trade Show Luncheon, Tuesday Awards Luncheon, Tuesday Breakfast, and Wednesday Breakfast.

**Guest registration** provides entrance to all education sessions and meal/social functions. *Guest* refers to a spouse or relative, NOT a business associate or staff colleague. **A guest registration does not qualify for CEs with TDLR.** Please be sure to include the guest's name.

### Special Needs

Do you have special needs? Please indicate any dietary/physical needs by sending an e-mail description of your needs by February 1 to Doris Koch, [dkoch@taad.org](mailto:dkoch@taad.org).

### Payment/Method of Payment

Full payment must accompany your registration form. TAAD accepts only checks and money orders. Registrations postmarked after the cut-off date will be billed for the difference. All participants must pay in full prior to receiving on-site conference materials.

### Cancellation and Refund Policy:

No refunds will be issued for extra tickets, one-day registrations or guest registrations. **Regular registration fees** will be applicable to forms accompanied by registration fee(s) and postmarked no later than January 21, 2022. Review "*Policies and Procedures*" for cancellation penalties. If you have a potential scheduling conflict, please be sure you understand the policy before registering. TAAD will mail all refunds after the conclusion of the conference.

- **Cancel by January 21: \$50 penalty**
- **Cancel January 22– 31: \$100 penalty**
- **Cancel February 1 or later: Total forfeiture of registration**     **NO REFUNDS FOR TICKETS ORDERED.**

**→→Registration confirmation:** TAAD will send confirmation of registration by way of **e-mail**. Please be sure to include your current email address!

**Return completed form (with check payable to TAAD) to:**

**TAAD    7700 Chevy Chase Drive, Building One, Suite 425    Austin, TX 78752-1558**  
**Questions? (512) 467-0402**