

Registration Form

Summit intended audience: elected and appointed officials; municipal and regional planners; workforce training professionals

Full Name (Please print) _____

Company / Agency _____

Mailing Address _____ City _____ State _____ Zip _____

Phone _____ E-mail _____

Because capacity is limited, please indicate which sessions/events you are interested in attending during the conference (check only one per session):

Session 1 Monday, 11:15-12:30	Training the New Workforce <i>Transitional needs for the workforce</i>	<input type="checkbox"/>
	Planning for HAVs <i>Planning issues and concerns for municipalities</i>	<input type="checkbox"/>
	Commonwealth Resources for Communities <i>State resources for communities to implement technology and infrastructure</i>	<input type="checkbox"/>
Lunch Monday, 12:30-1:30		<input type="checkbox"/>
Session 2 Monday, 1:45-3:00	Who's Responsible? <i>Ethics, liability, and insurance</i>	<input type="checkbox"/>
	To Protect and Serve <i>Safety, security, and tangential industries</i>	<input type="checkbox"/>
	Future of Transit <i>Multimodal transportation and placemaking</i>	<input type="checkbox"/>
	Expectations in Mobility & Paratransit <i>Vulnerable communities and personal mobility</i>	<input type="checkbox"/>
Breakfast Tuesday, 8:00-9:30		<input type="checkbox"/>
HAV Demonstrations Tuesday, 10:00 – 12:00	Thomas B. Larson Test Track Demonstrations <i>A variety of vehicles and vendors will be on hand to offer demonstrations of HAV technology.</i>	<input type="checkbox"/>

continued on other side

Please indicate your affiliation (*check one*):

HAV Task Force Member.....	<input type="checkbox"/>
PennDOT leadership.....	<input type="checkbox"/>
Host MASITE and ITSPA.....	<input type="checkbox"/>
Legislative Executive Director.....	<input type="checkbox"/>
Member of the General Assembly.....	<input type="checkbox"/>
Sponsor.....	<input type="checkbox"/>
Exhibitor.....	<input type="checkbox"/>
Speaker/Moderator.....	<input type="checkbox"/>
Other (please indicate here) _____	<input type="checkbox"/>

Dietary Restrictions?: Vegetarian Gluten-free Dairy-free
 (check, if any) Other _____

NOTES:

- 1. Registrations are available for \$55. Make checks payable to MASITE and note "Pennsylvania Automated Vehicle Summit" on the check.**
- 2. Send this registration form and check payment to Jeff Bergsten at Michael Baker International: 4431 N. Front Street, Harrisburg, PA, 17110.**
- 3. REGISTRATIONS MUST BE ACCOMPANIED BY PAYMENT.**
- 4. Summit capacity is limited. Once capacity is reached, any paid registrations received will be placed onto a waiting list and accepted only if spaces become available. Any registration payments that cannot be accepted will be returned at no cost.**
- 5. Registrations will be confirmed via e-mail as being either accepted or placed on the waiting list.**
- 6. Questions? E-mail Jeff at: jbergsten@mbakerintl.com.**