

INFORMATION SHEET

DoubleTree by Hilton, Lafayette

Tuesday, January 27 - Thursday, January 29, 2026

SCHEDULE OF EVENTS

Tuesday, January 27

- Summit Golf Outing 11:00 AM—2:00 PM—TOPGOLF Lafayette \$110 includes lunch buffet and 2 Games of TopContender based on team competition
- Summit Workshop
 - Damage Investigation Workshop \$150
 8:30 AM 12:00 PM
 - Utility Locator Skills Enhancement Workshop \$250
 8:30 AM 4:30 PM
 - Utility Mapping with GIS Training \$150
 8:30 AM 12:30 PM
 - Ground Penetrating Radar training \$150
 1:00 PM 5:00 PM
- Summit Reception included in registration of any of the Summit events
 - 5:00 PM 7:00 PM Exhibit Hall opens

Wednesday, January 28 – Thursday, January 29

- Summit Sessions Registration
 - \$289 (Early)
 - o \$329 (after 12/2/25)
 - \$379 (after 1/6/26)
 Includes entry to all sessions, Exhibit Hall, lunch and receptions.
 Workshops are not included.

Hotel Room Reservations

Room rates start at \$124 per night.

Reservations must be made by **Sunday, January 13, 2026**, to receive this rate. For reservations, call: (800) 222-8733 - Event: Louisiana Damage Prevention Summit

Online Reservation link is coming soon.



Attendee Registration

DoubleTree by Hilton, Lafayette Tuesday, January 27 – Thursday, January 29, 2026

Primary Contact:	Primary Contact: Title:							
Company:								
Mailing Address:								
City, State, ZIP:								
Work Phone:		Email:						
Attendee Names Early Bird \$289.0 Regular (After 12/2/25) \$329.0 Late / On-Site (After 1/6/26) \$379.00	(\$329/	Utility Mapping with GIS Training \$150)	Ground Penetrating Radar Training (\$150)	Damage Investigation Training (\$150)	Utility Locator Skills Enhancement Workshop (\$250)	Golf (\$110)	Amount Due	
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Total Amount Due							\$	
Payment Information: Charge credit card below Send me an invoice Visa Mastercard Discover American Express Card#					Make Checks Payable To: ACTS PO Box 644 Conway, AR 72033 Cancelling before 12/27/25 will receive a refund, less a non-refundable \$100 deposit. No refunds will be issued after this date.			
Sec # Exp. Date: Name on Card:								
Cards Billing Address:								
Amount Charged: Signature:					Charge will show ACTS NOW on			