



## INFORMATION SHEET

### ***Embassy Suites Franklin***

**Wednesday, March 25 – Friday, March 27, 2026**

## SCHEDULE OF EVENTS

### **Wednesday, March 25**

- ***Summit Golf Outing – Towhee Golf Club - \$110***  
Includes cart, range balls and boxed lunch – Tee time TBD
- ***Summit Workshops***
  - **Damage Investigation Training Workshop - \$150**  
8:30 AM – 12:30 PM
  - **Utility Locator Training Workshop - \$250**  
8:30 AM – 4:30 PM
- ***Summit Reception*** – included in the registration of any of the Summit event
  - 5:00 PM – 7:00 PM

### **Thursday, March 26 – Friday, March 27**

- ***Summit Sessions – Registration***
  - **\$289** (Early)
  - **\$329** (after 1/28/26)
  - **\$379** (after 3/4/26)

Includes entry to all sessions, Exhibit Hall, lunch and receptions.  
Workshops are not included.

### ***Hotel Room Reservations***

Room rates start at \$179 per night.

Reservations must be made by  
Sunday, February 22, 2026, to receive this rate.  
For reservations, call: (615) 515-5151 or (800) 362-2779

Event: Tennessee Summit

Online Reservation link coming soon!

For more information, visit [www.tennessee.damagepreventionsummit.com](http://www.tennessee.damagepreventionsummit.com), call ACTS at 501-548-6363, fax 501-548-6969 or email [thesummit@aligningchange.com](mailto:thesummit@aligningchange.com)

## Attendee Registration

### Embassy Suites Franklin

Wednesday, March 25 – Friday, March 27, 2026



Primary Contact: \_\_\_\_\_ Title: \_\_\_\_\_

Company: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, State, ZIP: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Email: \_\_\_\_\_

| Attendee Names                |          | Summit   | Damage        | Utility  | Golf    | Amount |
|-------------------------------|----------|----------|---------------|----------|---------|--------|
| Early Bird                    | \$289.00 | (\$289 / | Investigation | Locator  | (\$110) | Due    |
| Regular (After 1/28/26)       | \$329.00 | \$329 /  | Training      | Training |         |        |
| Late / On-Site (After 3/4/26) | \$379.00 | \$379)   | (\$150)       | (\$250)  |         |        |
|                               |          |          |               |          |         |        |
| Name                          |          |          |               |          |         |        |
| Name                          |          |          |               |          |         |        |
| Name                          |          |          |               |          |         |        |
| Name                          |          |          |               |          |         |        |
| Total Amount Due              |          |          |               |          |         | \$     |

|   |            |
|---|------------|
| Payment Information: <input type="checkbox"/> Charge credit card below <input type="checkbox"/> Send me an invoice                            |            |
| <input type="checkbox"/> Visa <input type="checkbox"/> Mastercard <input type="checkbox"/> Discover <input type="checkbox"/> American Express |            |
| Card#   |            |
| Sec #   | Exp. Date: |
| Name on Card:   |            |
| Cards Billing Address:  |            |
|   |            |
| Amount Charged:   | Signature: |

#### Make Checks Payable To:

ACTS  
PO Box 644  
Conway, AR 72033

Canceling before **2/25/26** will receive a refund, less a non-refundable \$100 deposit. No refunds will be issued after this date.

**Charge will show as ACTS NOW on statement.**