

NORTHEAST LAUNDRY ASSOCIATION - WOODSTOCK, VT

OCTOBER 16-18, 2008

REGISTRATION FORM FOR 96TH ANNUAL MEETING & FALL CONFERENCE

Please make a copy of this form for each attendee. **To register, please complete and return with payment no later than October 10th** to Northeast Laundry Association, 389 Main Street, Suite 202, Malden, MA 02148, Fax: 781.397.8887. (You may fax this form to the NELA office with credit card information or submit the original form with a check.) If you have any questions, please call the NELA office at 781.397.8870 or nela@guildassoc.com.

Name: _____ Nickname: _____
Title: _____ Company: _____
Street: _____
City: _____ State: _____ Zip: _____
Phone: () _____ Fax: () _____ Email: _____
Spouse/Guest Name: _____ Nickname: _____
Spouse/Guest Company: _____
Child's Name: _____ Age: _____
Child's Name: _____ Age: _____
Arrival date/time: _____ am/pm *and* Departure date/time: _____ am/pm
I would like vegetarian meals yes no Dietary Restrictions: _____

	<u>members/spouse</u> (postmarked by 9/12)	<u>members/spouse</u> (postmarked by 9/26)	<u>members/spouse</u> (postmarked after 9/26)
Full Conference	___ @ \$350.00 each	___ @ \$400.00 each	___ @ \$425.00 each
Golf Registration	___ @ \$225.00 each	___ @ \$250.00 each	___ @ \$275.00 each
	<u>non - members/spouse</u> (postmarked by 9/12)	<u>non - members/spouse</u> (postmarked by 9/26)	<u>non - members/spouse</u> (postmarked after 9/26)
Full Conference	___ @ \$600.00 each	___ @ \$650.00 each	___ @ \$675.00 each
Golf Registration	___ @ \$225.00 each	___ @ \$250.00 each	___ @ \$275.00 each

(player's name & handicap _____)

Registration Amount Enclosed = \$_____

Sponsorship Opportunities (see enclosed flyer for details)

Sponsorship Amount Enclosed = \$_____

Exclusive Naming Rights	\$2500	Overall Gold	\$1200	Golf Flag*	\$100
Overall Platinum	\$1500	Overall Silver	\$500		
Contribution	Amount \$_____	Prize Donation*	_____		

Total Enclosed = \$_____

() Enclosed is my check for

*(please complete form on other side)

() Please charge my (please circle one)

MasterCard

Visa

AMEX

Card #: _____ Exp. Date: _____

Name on Card: _____ Company: _____

Signature: _____

CRACKER BARREL SESSION/TABLE TOP DISPLAY SIGN UP INFORMATION

Associate Members: If you would like to participate in the Cracker Barrel Session, please indicate your interest below. Space is limited and timeslots will be reserved on a first-come, first-served basis.

_____ Yes! I am a NELA Associate member and wish to sign up for 5 minutes at the **Cracker Barrel Session**. I understand that NELA will supply a podium with microphone and that my company is responsible for any other A/V or equipment needed.

_____ Yes! I am a NELA Associate member and wish to sign up **a table top display** at the Annual Meeting. I understand that NELA will supply a skirted table, 1 chair, and a wastebasket and that my company is responsible for any other A/V or equipment needed.

Please note that table displays are open on Saturday from 7:00 am - 12:30 pm. A company flyer also may be put on the vendor table during the Annual Banquet on Saturday night. We encourage you to take the rest of the time allocated at the conference to network and enjoy the activities provided.

If the person speaking during the Cracker Barrel Session is different from the person registered for the annual meeting, please fill out the information below. *Please note that you must be registered in order to take advantage of any of the educational sessions or meals.*

Name: _____

Title: _____

Company: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: (____) _____ Fax: (____) _____

Email: _____

Golf Flag Logo

If this is the first year your company has purchased a golf flag sponsorship or your logo has changed, please provide us with a logo in one of the following formats: .eps or .jpg (high resolution) - **Please send your graphic files to nela@guildassoc.com**. If you require assistance or have questions please call us at 781.397.8870.

_____ I am sending our logo to nela@guildassoc.com.

_____ Please use the old logo.

Additional Prize Donation

If you would like to provide a prize to be given away as a door prize or as a booby prize, please indicate your choice below. Please note that these prizes will be given away at various times throughout the conference.

Yes! I will donate an additional prize (Please indicate your delivery method and the prize you are donating below.)

_____ I will mail the prize to the NELA office before October 10th.

_____ I will bring the prize with me to the Conference.

Our prize is _____