

Exhibitor Registration

Organization _____

Address _____

City/State/Zip _____

Tel. _____ Fax _____

E-mail _____ Website _____

Contact Name _____ Title _____

We hereby reserve one exhibit space and /or ad at the 11th Annual Nonprofit Leadership Conference March 16th, 2005 at the Seattle Center. We acknowledge that all fees are due not later than March 1st. No refunds are available after that time. Earlier withdrawals will receive a refund of paid fees, less a \$10 administrative fee. Lunch is available for exhibitors at an additional charge of \$15.

Authorized Signature _____

Payment

- Exhibitor **\$250**
- ¼ Page Ad **\$200 (\$350 with exhibit table)**
- ½ Page Ad **\$300 (\$450 with exhibit table)**
- Full Page Ad **\$400 (\$550 with exhibit table)**
- Lunch (\$15 per person)

_____ Check Enclosed

Please charge _____ Visa _____ MC

Cardholder

Name _____

Card# _____ Exp. Date _____

Signature _____

Submit registration form to Executive Alliance, PO Box 22438 Seattle, WA 98122

Tel. 206-328-3836; Fax 206-323-1017; Email conference@exec-alliance.org; website www.nplconference.org