



Connections 2009 Registration

Registration Information

First Name: _____ Middle Initial: _____ Last Name: _____

Badge Nickname: _____ Job Title: _____

Registrant's E-Mail: _____

Company: _____

Street Address 1: _____ Street Address 2: _____

City: _____ ST: _____ ZIP: _____ Phone Number: _____

Please confirm that contact information can be shared with other Connection 2009 attendees : _____

Payment Options

Early-Bird Deadline:

For early-bird registration of \$650/person, register by May 15. Early-bird rates are contingent on receipt of payment by Friday, May 15. If payment is not received by this date, registration fee will increase to the regular rate.

Registration Fee: \$725/person (includes conference attendance, all conference meals, breaks, receptions and Tuesday activities). Due by Friday, October 9. No refunds will be issued after this date.

Pay By Check: _____

Send completed form via fax (402) 398-0065 or include with check made payable to Consortia Consulting, 9300 Underwood Avenue, Suite 310, Omaha, NE 68114.

Name of Person Who Referred You to Connections 2009: _____

Bill Me At Address Above: _____

Contact Information (If different from above)

First Name: _____ Last Name: _____

E-Mail: _____ Phone Number: _____

Hotel Information

For reservations, contact Hotel Valley Ho at 866-882-4484.