



# 2010 NAID<sup>®</sup> Annual Conference Registration Form

March 3-5, 2010  
Red Rock Resort & Spa  
Las Vegas, Nevada

Please Duplicate As Necessary

Company Name \_\_\_\_\_  
 Address Line 1: \_\_\_\_\_  
 Address Line 2: \_\_\_\_\_  
 City: \_\_\_\_\_ State/Prov.: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
 Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

*The Full Registration Fee (Primary or Additional) includes all conference sessions and materials, Expo Pass, Breakfast, all Refreshment Breaks and Receptions, and Friday Expo Lunch. The Golf Outing on Wednesday is an optional event.*

Please list names as they should appear on name badge:

|  | BY<br>Feb 11 <sup>th</sup> | AFTER<br>Feb 11 <sup>th</sup> |
|--|----------------------------|-------------------------------|
| <input type="checkbox"/> <b>Primary Full Registration</b> (Please check appropriate type/rate below)   |                            |                               |
| <input type="checkbox"/> <b>Member Rate</b>  | \$595                      | \$695                         |
| <input type="checkbox"/> <b>Non-Member Rate</b>  | \$995                      | \$1095                        |
| <input type="checkbox"/> <b>Complimentary Exhibitor Rate</b> (Provided with contracted Exhibit Space)  | \$0                        | \$0                           |
| Name: _____ Email: _____   |                            |                               |
| <input type="checkbox"/> <b>Additional Full Registration(s):</b> (Must be employee of same company)  | \$455                      | \$555                         |
| Name: _____ Email: _____   |                            |                               |
| Name: _____ Email: _____   |                            |                               |
| Name: _____ Email: _____   |                            |                               |
| <input type="checkbox"/> <b>Expo Pass/Booth Staff:</b> (Available to representatives from same company. This pass good for all receptions, continental breakfasts & breaks in Expo, and lunches. Includes Celebrity Cocktail Reception on Thursday.) | \$195                      | \$225                         |
| Name: _____ Email: _____   |                            |                               |
| Name: _____ Email: _____   |                            |                               |
| <input type="checkbox"/> <b>Golf Outing Participants(s)(optional):</b> Will you need to rent clubs? _____ (Payment made at course)   | \$145                      | \$165                         |
| _____ (Golf Outing is Wednesday, March 3 <sup>rd</sup> from 6:30AM-2:00PM)   |                            |                               |
| <input type="checkbox"/> <b>Thursday Lunch Guests(s):</b> _____  | \$50                       | \$60                          |
| <input type="checkbox"/> <b>Thursday Cocktail Reception Guest(s):</b><br>(for Guests only – Full registrations and Expo Passes include the Cocktail Reception the Thursday Cocktail Reception)   | \$110                      | \$120                         |

Registrant (not Guests) contact information will be provided to exhibitors, sponsors &/or presenters.

To remove your information, check this box  Do NOT provide the names or contact information for any of the registrants on this form.

**MAIL or FAX by February 11, 2010 for Early Registration Discount**

**CANCELLATIONS** must be sent via fax to (602)788-4144 or email to conferences@naidonline.org.  
 For details on cancellation policies, see brochure or the website (www.naidonline.org/conference/conf2010/)

**PAYMENT INFORMATION:**  
 There Are A Total Of \_\_\_\_\_ Forms Covered By This Payment Total Payment USD \$ \_\_\_\_\_  
 Enclosed is Check No. \_\_\_\_\_ Payable & Mailed to: NAID, 1951 W Camelback Rd, STE. 350, Phoenix, AZ 85015  
 AMERICAN EXPRESS/VISA/MASTERCARD#: \_\_\_\_\_ EXPIRATION DATE \_\_\_\_\_  
 NAME ON CARD: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

This registration form must be received by **February 24, 2010** or you will have to register on site.

On-site registrations may incur an additional fee of \$50-\$100

FAX to: (602) 788-4144

Mail to: NAID, 1951 W Camelback Rd, Ste 350, Phoenix, AZ 85015

QUESTIONS? Call (602)788-6243 or E-mail conferences@naidonline.org

|             |          |               |             |            |
|-------------|----------|---------------|-------------|------------|
| Rec'd Date: | Member # | Postage Date: | Registered: | Confirmed: |
|-------------|----------|---------------|-------------|------------|