

UNSCC 12th Annual Conference 2005

Community Information Table Registration Form

Date _____

Company / Vendor / Agency _____

Subject/Purpose of Information Table _____

Setup Requirements 1__2__ tables, 1__2__3__4__ chairs, 1__2__ electrical outlets
(please check)

Other Requirements please list _____

Contact First Name _____ Last Name _____

Street Address _____

City _____ Zip Code _____

Email Address _____

Phone Number _____ office/ cell /home (please circle)

Suggested Donation

Amount Enclosed

<i>Nonprofit</i>	<i>\$25.00</i>	_____
<i>Government Agency</i>	<i>\$50.00</i>	_____
<i>Corporate</i>	<i>\$100.00</i>	_____
<i>Lunches</i> (Number _____ X \$10.00 each)		_____
<i>Total Donation</i>		_____

Mail fee and form to:

***Ken Henning
347 Menker Ave.
San Jose, Ca 95128
Phone (408) 887-4309***