

Carolina-Virginias Telephone Membership Association
Fall Conference, October 24-26, 2007
The Grove Park Inn, Asheville, North Carolina

ASSOCIATE MEMBER REGISTRATION FORM

Send No Money Now – You Will Be Billed Following the Meeting!*

Person Completing Form _____ Phone _____

Company _____

Address _____

City _____ State _____ Zip _____

Attendees:

(Preferred name for badge)

Email Address:

E: _____
E: _____
E: _____
E: _____
E: _____
E: _____
E: _____
E: _____
E: _____
E: _____
E: _____
E: _____

Events:

(Please indicate planned event attendance)

Wed. Reception Thurs. Breakfast Fri. Breakfast
 Wed. Reception Thurs. Breakfast Fri. Breakfast
 Wed. Reception Thurs. Breakfast Fri. Breakfast
 Wed. Reception Thurs. Breakfast Fri. Breakfast
 Wed. Reception Thurs. Breakfast Fri. Breakfast
 Wed. Reception Thurs. Breakfast Fri. Breakfast
 Wed. Reception Thurs. Breakfast Fri. Breakfast
 Wed. Reception Thurs. Breakfast Fri. Breakfast
 Wed. Reception Thurs. Breakfast Fri. Breakfast
 Wed. Reception Thurs. Breakfast Fri. Breakfast
 Wed. Reception Thurs. Breakfast Fri. Breakfast

(Attach additional pages as needed.)

Children (\$50 registration fee to cover meals) (Ages)

Children (\$50 registration fee to cover meals) (Ages)

Please provide information regarding any special needs of Conference Attendees: _____

Please return this form by October 1, 2007.

Carolina-Virginias Telephone Membership Association
5910 Clyde Rhyne Drive, Sanford, North Carolina, 27330
Phone: 919-708-5004 ❖ Fax: 919-708-5226

Note: Cancellation required by 5 p.m. Friday, October 19 in order to avoid penalty payment.

** Amount billed based on the total direct costs of the Conference. Accuracy in indicating planned event attendance will lower the overall meeting cost.*