

NCBA Fall 2008 Annual Meeting & Trade Show

October 21 – 23



Exhibitor Registration

REGISTER ONLINE at www.nwcb.org or fill out form and fax or mail with payment information

Requests for refunds must be made in writing and NO REFUNDS after October 15, 2008

Your dues must be paid for registration to be valid

| <u>Type of Registration</u> | <u>Quantity</u> | <u>Fee</u> | <u>After Oct 1</u> | <u>Amount</u> |
|---|---------------------|------------|--------------------|---------------|
| 1. Full Registration (Includes 8 x 10 Booth, Pipe & Drape, Table, Chair, Wastebasket, Power, All Meals & Sessions for Tue, Wed, & Thu) | _____ | \$315.00 | \$335.00 | _____ |
| 2. Additional Full Registration (All meals, Sessions, Trade Show, without Booth) | _____ | \$210.00 | \$230.00 | _____ |
| 3. Trade Show Only (Includes 8 x 10 Booth, Pipe & Drape, Table, Chair, Wastebasket, Power, Continental Breakfast, Trade Show, Lunch, Snack, Banquet) | _____ | \$235.00 | \$265.00 | _____ |
| 4. Additional Trade Show Representative (Includes Continental Breakfast, Trade Show, Lunch, Snack, Banquet) | _____ | \$180.00 | \$200.00 | _____ |
| 5. Thursday Only (Continental Breakfast, Sessions, Lunch) | _____ | \$85.00 | \$95.00 | _____ |
| 7. Additional Banquet Ticket (Wednesday) | _____ | \$65.00 | \$75.00 | _____ |
| 8. Additional Author Breakfast (Wednesday) | _____ | \$35.00 | \$45.00 | _____ |
| NCBA TAX ID# 91-1245573 | AMOUNT SENT: | | | \$ _____ |

| <u>Name of Attendees</u> | <u>Registration Type (1-8)</u> | <u>Vegetarian Meals (Y/N)</u> | <u>Email Address</u> |
|--------------------------|--------------------------------|-------------------------------|----------------------|
| _____ | | | |
| _____ | | | |
| _____ | | | |
| _____ | | | |
| _____ | | | |

Company _____ Product _____

Contact: _____ Phone: (____) _____

Address: _____ City: _____ State: ____ Zip: _____

Hotel Reservations must be made by September 9, 2008 with the Coeur d'Alene Resort
800-688-5253 (Ask for Northwest College Bookstore Association rates)

Please send your check payable to **NCBA**

Payment Method:
 Check Bankcard
 Visa/MC #: _____
 Expiration: _____
 Signature: _____

Attn: Bill Semmler
 NIC Bookstore
 1000 W. Garden Ave.
 Coeur d'Alene, ID 83814
 208-769-3363 ph
 208-769-3306 fax
 Bill_Semmler@nic.edu

For NCBA Use
 Amount Received:
 \$ _____
 Date: _____