



Sponsor/Expo Registration Form

Indicate choices in the spaces below, and return by 9/30/08 (Sponsors) or 10/31/08 (Exhibitors).

Sponsor Category	Item	Total
<input type="checkbox"/> Bronze General Sponsor	\$250	_____
<input type="checkbox"/> Silver General Sponsor	\$500	_____
<input type="checkbox"/> Gold General Sponsor	\$1,000	_____
<input type="checkbox"/> Platinum General Sponsor	\$2,500	_____
<input type="checkbox"/> Bronze Prime - Break Sponsor	\$400	_____
<input type="checkbox"/> Silver Prime - Workshop Sponsor	\$750	_____
<input type="checkbox"/> Gold Prime - Plenary Sponsor	\$1,500	_____
<input type="checkbox"/> Platinum Prime - Evening Sponsor	\$5,000	_____
<input type="checkbox"/> Scholarship Sponsor	\$229	_____
<input type="checkbox"/> Please choose my recipient(s) for me.		
<input type="checkbox"/> I will provide the name and phone of recipient(s) on page 8.		
<input type="checkbox"/> Conference Pens Sponsor	\$375	_____
<input type="checkbox"/> Conference Writing Pads Sponsor	\$700	_____
<input type="checkbox"/> Conference Tote Bags Sponsor	\$1,900	_____

Exhibitor Category

All sponsors receive 10% discount off Exhibitor Booth Space.
Gold and Platinum sponsors receive one free Booth Space.

<input type="checkbox"/> Standard Display Table/Space	\$400	_____
<input type="checkbox"/> Premium Display Table/Space	\$500	_____
<input type="checkbox"/> Check if registering before 6/30 and would like an additional FREE space.		
<input type="checkbox"/> I am a Gold/Platinum Sponsor, and would like to reserve my FREE space.		

Additional Conference and Banquet Tickets

\$189 each if registered by 9/30/08, otherwise \$229.

<input type="checkbox"/> Additional conference tickets needed	\$189 / \$229	_____
<input type="checkbox"/> Banquet tickets needed	\$75	_____

TOTAL AMOUNT ENCLOSED: _____

**Send completed Registration Form (front and back) with payment by check to:
Healing the Culture, P.O. Box 82842, Kenmore, WA 98028.**

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CONTACT INFORMATION

Name of contact person: _____

Contact Address: _____

City: _____ State: _____ ZIP _____

Phone: _____ Email: _____

SPONSOR / EXHIBITOR INFORMATION

Please PRINT as you would like your information to appear on applicable conference materials.

Name: _____

Address: _____

City: _____ State: _____ ZIP _____

Phone: _____

Website: _____

ARTWORK INFORMATION

_____ I will be sending all artwork by email before the deadlines specified on page 6.

_____ I have enclosed all artwork with this Registration Form.

_____ I have attached my 100-word description. (Platinum level)

Print name and phone # of all registrants (free registrations, paid registrations, and scholarships).

(1) _____

(2) _____

(3) _____

(4) _____

(5) _____

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