



Conference Registration

February 11-16, 2010

Please be sure to reserve your room at the Westin Diplomat Resort & Spa, Hollywood, Florida

- Call 888-627-9057. Ask for the *National Labor & Management Conference rate as indicated:*

- \$359** - Superior (Single/Double)
- \$369** – Deluxe (Single/Double) features a partial ocean view
- \$379** – Grand Deluxe (Single/Double) – Ocean View

Or reserve your room online at:
<http://www.starwoodmeeting.com/Book/NLMC2010>

Register Early!

You will be entered into a monthly drawing for **\$150 Gift Check**. Drawings begin June, 2009 and run through November 15, 2009.

Please Help Us Widen the Circle

Send us the names and contact information of your colleagues or counterparts who do not currently attend The National Labor & Management Conference. With your help, we will invite them to upcoming conferences. As a thank you, we will give you a \$100 American Express gift check for each individual recommended that attends the conference (must not have attended the conference in the past three years).

Contact: Carol Shields, National Labor & Management Conference, PO Box 461, Northport, NY 11768
Email: cshields@laborandmanagement.org Website: www.LaborAndManagement.org
Tel: 888-459-3111, Fax: 888-409-3222 Online Registration: www.LaborAndManagement.org

C O N F E R E N C E R E G I S T R A T I O N

Name(s): _____

Title: _____

Organization: _____

Address: _____

City: _____ State: _____ Zip: _____

Office Tel: _____ Office Fax: _____

E- Mail: _____ (For Conference Updates)

The registration fee for the National Labor & Management program is \$945, which includes 4 days of seminars and materials, breakfasts and receptions. Registrants will receive a Certificate of Participation upon request. Please use this form for registration. **Conference registration fees are non-refundable after November 16, 2009.**

Attending Conference _____ x Registration Fee of \$945 = Total _____

- Enclosed is my check payable to: "NLMC, Inc."
- Please bill the following credit card: Amex Mastercard Visa

Credit Card No.: _____ Exp. Date: _____ Security Code (Back of Card): _____

Name on Credit Card: _____ Authorized Signature: _____

You may make payment by: *Mail* to NLMC, Inc., Box 461, Northport, NY 11768
Phone to (888) 459-3111 – Toll Free *Fax* to 888-409-3222
www.LaborAndManagement.org