

WOVI 2016 ANNUAL CONFERENCE REGISTRATION FORM

Saturday April 23, 2016, 7:30 AM - 4:00 PM

Holiday Inn Dallas-Richardson 1655 N. Central Expressway – Richardson, TX 75080

NAME:		
ADDRESS:		
PHONE NO.:	E-MAIL:	
CHAPTER AFFILIATION:		

CONFERENCE REGISTRATION (WOVI MEMBERS & GUESTS, NON-VENDOR)			
Full Conference Registration (Member)	\$79.00	\$	
Full Conference Registration (Guest)	\$129.00	\$	
I Have Item(s) to Contribute to the Silent Auction (We will Contact You)	YES	NO	

VENDOR FAIRE REGISTRA	TION (VENDORS ONLY) AVAILABLE TH	ROUGH 4/13/2016	<mark>6 ONLY</mark>
Vendor Company Name:			
Vendor Company Address:			
Vendor Phone No.:	E-Mail:		
Member Vendor Full Table (Includes Conference Registration)		\$119.00	\$
Non-Member Full Table (Includes Conference Registration)		\$169.00	\$
Member Half Table (Includes Conference Registration)		\$104.00	\$
Please provide a BRIE	F description of the services or produc	ts that you will exhib	oit:
	endors are responsible for any other need o hours: 6:30 AM - 7:30 AM Vendor Faire		

Member and guest Registration after April 18 or at the door is limited and includes a late fee/person of \$100.	Late fee (after 4/18) \$
TOTAL REGISTRATION COST	\$

REGISTRATION PAYMENT: Please select payment method and mail this registration form to:			
	WOVI, Inc., P.O. Box 803144, Dallas, TX 75380-3144.		
Check:	Make checks payable to WOVI, Inc., and include with registration form		
Credit Card:	Credit Card/Debit Card No.:		
	Card Expiration Date:	CVV:	
	Signature:		
		Date:	
Online PayPal:	PayPal Name:	Date:	

WOVI, Inc., P.O. Box 803144, Dallas, TX 75380-3144
WOVI is a 501(c)(3)non-profit organization. Your registration and Silent Auction contributions are tax deductible to the full amount allowed by law.