



WOVI 2016 LEADERSHIP SUMMIT REGISTRATION FORM

Saturday, September 24, 2016, 8:00 AM – 3:00 PM

Hilton Garden Inn

1001 W PGBT, Richardson, TX 75080

NAME:	
ADDRESS:	Dietary restrictions: <input type="checkbox"/> Gluten-free <input type="checkbox"/> Vegetarian <input type="checkbox"/> Other _____
PHONE #:	E-MAIL:
CHAPTER AFFILIATION:	
YOUR 2016-2017 LEADERSHIP POSITION:	

LEADERSHIP SUMMIT		
WOVI Member Rate: Leadership Summit	\$60.00	\$
Guest Rate: Leadership Summit	\$110.00	\$
Awards Luncheon Only (check for actual time)	\$30.00	\$
I am a newly elected 2016-2017 WOVI officer for the first time:	YES	NO
I previously served in this WOVI Chapter position: (list most recent)		

List names below for chapter or sponsor paying for multiple attendees:	\$60.00 each or per sponsor level
1. _____	2. _____
3. _____	4. _____
5. _____	6. _____
7. _____	8. _____
9. _____	10. _____
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. Please check with your tax consultant for possible personal deductions.