

WOVI 2019 LEADERSHIP SUMMIT REGISTRATION FORM

Saturday, September 28, 2019, 8:30 AM - 3:30 PM

Hilton Garden Inn 1001 W PGBT, Richardson, TX 75080

NAME:			
ADDRESS:		Gli Ve	restrictions: uten-free getarian :her
PHONE #:	E-MAIL:	1	
CHAPTER AFFILIATION	ON:		
YOUR 2019-2020 LE	ADERSHIP POSITION:		
	LEADERSHIP SUMMIT		
WOVI Member Rate: Leadership Summit		\$60.	00 \$
Guest Rate: Leadership Summit		\$110	.00 \$
Awards Luncheon Only (12.00 Noon – Register at 11:30 AM)		<mark>\$35.</mark>	<mark>00</mark> \$
I am a newly elected 2019-2020 WOVI officer for the first time:		YES	S NO
I previously served i	n this WOVI Chapter position: (list most rece	ent)	
List names below for chapter or sponsor paying for multiple attendees:		e attendees:	\$60.00 each or per sponsor level
1.	2.		
3.	4.		
5.	6.		
7.	8.		
9.	10.		
	TOTAL REGISTRATION COST		\$
REGISTRATION	I PAYMENT: Please select payment method WOVI, Inc., P.O. Box 803144, Dallas, T		ation form to:
Check:	Make checks payable to WOVI, Inc., and in	nclude with registration	on form
Credit Card:	Credit Card/Debit Card No.:		
	Card Expiration Date:	CVV:	
	Signature:	Date:	
Online PayPal:	Signature: PayPal Name:	Date: Date:	