



2017 CMI CONFERENCE

HOTEL ELEGANTE - COLORADO SPRINGS

OCT. 9TH – OCT. 12TH

AFFILIATE MEMBER/EXHIBITOR CONFERENCE REGISTRATION FORM

AFFILIATE MEMBER NAME: _____

COMPANY: _____

ADDRESS: _____ STATE _____ ZIP _____

PHONE: _____ EMAIL: _____

**PLEASE LIST ABOVE ONLY THE PERSON WHO WILL BE ATTENDING THE CONFERENCE.
ADDITIONAL CONTACT INFORMATION CAN BE LISTED BELOW.

CONTACT: _____

<input type="checkbox"/> RENEW MEMBERSHIP FOR 2017 AND ATTEND WITHOUT A BOOTH	\$1,250.00
<input type="checkbox"/> ATTEND AND EXHIBIT AT THE 2017 CMI CONFERENCE (includes 1 attendee)	\$1,500.00
<input type="checkbox"/> ADDITIONAL STAFF MEMBER _____	\$ 250.00
<input type="checkbox"/> ADDITIONAL STAFF MEMBER _____	\$ 250.00
TOTAL:	\$

INTERESTED IN SPONSORING AN EVENT: ___ YES ___ NO

INTERESTED IN PROVIDING RAFFLE PRIZES: ___ YES ___ NO PRIZE: _____

PAYMENT METHOD:

CHECK# _____ CREDIT CARD NO: _____ EXP: _____ CV2: _____

NAME ON CARD: _____ ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PLEASE EMAIL YOUR REGISTRATION TO CMICJA1994@GMAIL.COM IF PAYING BY CREDIT CARD
OR MAIL TO: CMI, 13301 BAILEY BRIDGE RD., MIDLOTHIAN, VA 23112