

MANAGEMENT UPDATE

2014 MANAGEMENT UPDATE CONFERENCE REGISTRATION FORM

THE COSMOPOLITAN OF LAS VEGAS – LAS VEGAS, NV

COMPANY: _____

ADDRESS: _____

CITY/STATE/ZIP: _____ PHONE: _____

(1) ATTENDEE: _____ BADGE NAME: _____

First-Time Attendee? Yes No Email: _____

Spouse/Guest Package: Yes No Spouse/Guest Name: _____

(2) ATTENDEE: _____ BADGE NAME: _____

First-Time Attendee? Yes No Email: _____

Spouse/Guest Package: Yes No Spouse/Guest Name: _____

(3) ATTENDEE: _____ BADGE NAME: _____

First-Time Attendee? Yes No Email: _____

Spouse/Guest Package: Yes No Spouse/Guest Name: _____

CONFERENCE FEES

First Attendee Fee — \$1,000.00\$ 1,000.00

___ Additional Attendee Fee — \$500.00 each.....\$ _____

___ Spouse/Guest Package — \$150.00 each.....\$ _____

TOTAL AMOUNT DUE.....\$ _____

Please charge the Total Amount Due to my credit card:

Card Holder's Name: _____ Exp. Date: _____

Card # _____ Card Type: _____ Sec Code: _____

Signature: _____

FAX TO: 440-526-5803

Precision Machined Products Association
6700 West Snowville Road - Brecksville, Ohio 44141
Phone: (440) 526-0300