

# Delegate Registration Form

The Expo Labrador 2007 Conference and Trade Exhibition will be held June 24-27 in Happy Valley-Goose Bay, Labrador. **To register as an event delegate, fax this Delegate Registration Form to 709-896-8039.**

Payment is due upon registration. Cheques must be received within two weeks of registration. Registration fees must be paid prior to the event. Full refund less a \$50 administrative fee will be provided for cancellations received in writing before May 25, 2007. **Cancellations received after May 25, 2007 will not be eligible for a refund.**

### DELEGATE INFORMATION

Full Name: \_\_\_\_\_  
 Organization: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City / Town: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
 Telephone #: \_\_\_\_\_ Fax #: \_\_\_\_\_  
 Email Address: \_\_\_\_\_

### PASS / TICKET INFORMATION

				<u>Number</u>	<u>Amount</u>
Conference Pass:	Full Pass	<input type="checkbox"/>		NA	_____
	Full Pass – LNCC Member	<input type="checkbox"/>		NA	_____
	Day 1 Only <input type="checkbox"/> Day 2 Only <input type="checkbox"/>			NA	_____
Social Events:	Meet & Greet	<input type="checkbox"/>		Complimentary	_____
	Tradex Lunch	<input type="checkbox"/>		NA	_____
	Luncheon	<input type="checkbox"/>		\$15	_____
	Cinco de Mayo Fiesta	<input type="checkbox"/>		\$35 X	_____
	Golf Tournament & BBQ	<input type="checkbox"/>		\$55 X	_____
	BBQ Only	<input type="checkbox"/>		\$100	NA
	LNCC Luncheon	<input type="checkbox"/>		\$35 X	_____
				\$25 X	_____
				Sub-Total	_____
				HST (14%)	_____
				<b>TOTAL</b>	_____

### PAYMENT INFORMATION

**Cheque** Please make cheque payable to "Expo Labrador Inc.". The cheque and a copy of the Trade Exhibition Registration Form should be sent separately from the Delegate Registration Form.

**Visa** Delegate Registration will be confirmed upon processing of your Visa number.

Visa Number: \_\_\_\_\_ Expiry Date: \_\_\_\_\_  
 Name on Card: \_\_\_\_\_  
 Signature: \_\_\_\_\_

### DELEGATE AGREEMENT

I have read the guidelines outlined by Expo Labrador concerning participation as a delegate.

Signature of Authorized Official \_\_\_\_\_ Date \_\_\_\_\_

Office use only: Date Received \_\_\_\_\_ Date Processed \_\_\_\_\_ Booth Number \_\_\_\_\_

