



# 6th Annual Awards & Conference

## Attendee Registration Form

Beverly Hilton Hotel • Beverly Hills, CA • August 22-23, 2008

### WAYS TO REGISTER

#### Fax Registration

1-888-363-3385

#### Mail-in Registration

Nefful USA

18563 E. Gale Ave.

City of Industry CA 91748

#### Email Registration

event@neffulusa.com

#### Questions?

Customer Service

1-626-839-6657

Monday – Friday

9:00 am - 6:00 pm

#### Event Department

event@neffulusa.com

### CONFERENCE SCHEDULE

#### Day 1 Workshop

Friday, August 22, 2008

9:45 am - 4:40 pm

#### Day 2 General Session

Saturday, August 23, 2008

8:45 am - 4:00 pm

#### Day 2 Award Dinner

Saturday, August 23, 2008

6:00 pm - 9:30 pm

#### Refund and Transfer Policies

If you cannot attend the seminars or awards dinner, it is possible to request a transfer or refund for your purchased tickets. A \$10 administrative fee will be deducted from all transfers and refunds.

If you choose to transfer, we will apply the prorated amount of your registration fee to another activity within the 2-day event. The transfer request must be received before August 15, 2008. Please note that transfer requests may be denied due to seat availability.

If you choose to receive a refund, refund requests must be sent in writing. Refund requests received by June 1, 2008 will be fully refunded, minus \$10 administrative fee. Requests received June 2<sup>nd</sup> through the 30<sup>th</sup> will receive a 75% refund. Refund requests received July 1<sup>st</sup> through July 31<sup>st</sup>, will receive a 50% refund. No refunds will be processed after August 1, 2008.

### ATTENDEE INFORMATION (Type or Print Clearly)

Name (Last, First)

Distributor ID#

Home Address

City

State

Zip Code

Phone Number

Fax Number

Email Address

### AWARDS & CONFERENCE REGISTRATION

	Before 5/1/2008	After 5/1/2008		No. of Attendees	Subtotal
<input type="checkbox"/> Day 1 Workshop (Lunch Included)	\$75	\$85	X	_____	= \$ _____
<input type="checkbox"/> Day 2 General Session (Lunch Included)	\$75	\$85	X	_____	= \$ _____
<input type="checkbox"/> Day 2 Award Dinner	\$60	\$70	X	_____	= \$ _____
<input type="checkbox"/> Day 2 Award Dinner (A Table of 12)	<del>\$720</del> \$660	\$720	X	_____	= \$ _____
<input type="checkbox"/> Package Price <i>Limited to the first 250 participants ONLY.</i>	\$170	\$190	X	_____	= \$ _____
<b>TOTAL EVENT FEES</b>					\$ _____

**Receive New Product Gifts Worth up to \$200**

### PAYMENT INFORMATION

Cardholder Name (Please Print)

\_\_\_\_\_

Credit Card Number

\_\_\_\_/\_\_\_\_-\_\_\_\_

Expiration Date

CVV

Contact Phone No.

**X**

Authorized Signature

Date

Note: Due to limited seating, registrations will not be confirmed until we receive full payment.

### Please Choose One

Cash

Visa

Master

Discover

Money Order

Personal Check