



Annual Conference Table Registration Form

Date: Saturday May 15, 2010

Time: 8:30–5:00 (Set up at 8:00 am)

Mercer University Administration and Conference Center
2930 Flowers Road, Atlanta, GA 30341

Organization Name: _____

Contact Person: _____

Mailing Address: _____

Phone: _____ E-Mail: _____
(confirmation will be sent by email)

Name of Person(s) Attending the Event:

_____ Cell: _____ (Electrical Outlet, if available?) _____

_____ Cell: _____

Exhibitor Opportunities:

Will provide a logo for the program & Website. (send to: espencer@nami.org)

Presenting \$1000 (Includes 4 lunches. Additional lunches at discount rate of \$5)

Standard \$ 500 (Includes 2 lunches. Additional lunches at discount rate of \$5)

Non-profit \$ 250 (Includes 2 lunches. Additional lunches at discount rate of \$5)

Please make checks payable to : NAMI Georgia Mail, fax or email your application to:

Deadline for inclusion in event Program is Friday, April 30, 2010

NAMI Georgia
3050 Presidential Drive, Suite 202
Atlanta, GA 30340

Email: Nami-ga@nami.org
Phone: (800) 728-1052
(770) 234-0855 Fax: (770) 234-0237

Workshops, Awards, Free Lunch for Sponsors