



# Conference Registration Form



Tuesday, July 26, 2011  
 &  
 Wednesday, July 27, 2011  
 Crossroads Hotel & Huron Event Center, Huron, SD



**Stay at the Conference Center!!!**  
 Contact the Crossroads Hotel & Huron Event Center at  
 (605) 352-3204 / (800) 876-5858 to book your room. Men-  
 tion MarketPlace 2011 to qualify for discounted rate of  
 \$74.99 (for up to 4 people in the room)

## REGISTRANT INFORMATION

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Business: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Yes  No Please include my information in this year's binder

Yes  No Please check if you have any special needs (physical, dietary, etc.): \_\_\_\_\_

<p><b>Online:</b> <a href="http://www.cfra.org/marketplace/registration">www.cfra.org/marketplace/registration</a></p> <p><b>Fax:</b> 402-472-0688</p> <p><b>Mail to:</b> UNL CARI Registration Services                  Attn: Audrey                  103H Miller Hall                  Lincoln, NE 68583-0711</p>	<p><b>Conference Questions Contact:</b>                  Joy Marshall 402-614-5558                  joym@cfra.org</p> <p><b>Registration Questions Contact:</b>                  Audrey George                  800-328-2851 / 402-472-1772                  cari@unlnotes.unl.edu</p>
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### Optional: INFORMATION FOR GOVERNMENT MONITORING PURPOSES

The following information is requested by the Federal Government, in order to monitor the Grantee's compliance with equal credit opportunity and nondiscrimination requirements. You are not required to furnish this information, but are encouraged to do so. The law provides that a Grantee may neither discriminate on the basis of this information, or on whether you choose to furnish it. However, if you choose not to furnish it, under Federal regulations this Grantee is required to note race and sex on the basis of visual observation or surname. If you do not wish to furnish the information, please check the box:

**Sex:**  Male  Female

**Ethnicity:**  Hispanic or Latino  
 Non-Hispanic/Latino

**Race/National Origin (Select one or more):**

American Indian or Alaska Native  
 White  Asian  
 Black or African American  
 Native Hawaiian or other Pacific Islander

### REGISTRANT PROFILE

**Are you a small business owner:**  Yes  No

If yes, please complete the following information:

- ⇒ How long have you been in business? \_\_\_\_\_
- ⇒ What is the status of your business?  
 Full time  Part-Time  Seasonal
- ⇒ How many employees do you have?  
 \_\_\_\_\_ Full Time \_\_\_\_\_ Part-Time \_\_\_\_\_ Seasonal
- ⇒ Have you completed a business plan your business?  
 Yes  No If no, would you like assistance?  Yes  No

Registration Rates	Payment Options
<p><b>Conference Registration Rates</b></p> <p><input type="checkbox"/> \$59 for one registration (before July 19, 2011)</p> <p><input type="checkbox"/> \$99 for one registration (after July 19, 2011)</p> <p><b>NOTE:</b>  <i>Registrations will be processed only if all requested information is provided and accompanied by full payment.</i></p>	<p><input type="checkbox"/> Check  <input type="checkbox"/> Please make checks payable to: UNL)</p> <p><b>Credit Card Options</b></p> <p><input type="checkbox"/> Discover  <input type="checkbox"/> Visa  <input type="checkbox"/> Master Card</p> <p>Cardholder Name: _____                  Card Number: _____                  Exp. Date: _____                  Signature: _____</p>