

# Exhibitor Networking



CONVENTION & EXPOSITION

2010 | ON THE PATH: UNITED. STRONGER. DETERMINED.

## Company Information (please print):

Company Name: \_\_\_\_\_

Contact Phone Number: \_\_\_\_\_

Contact Email: \_\_\_\_\_

## Annual Golf Tournament – Friday, June 18, 6:45 a.m.

Please register the following players:

Player's Name	Company Name	Handicap/ Average Score



## Complimentary Networking Events

In addition to Exhibit hours, this conference provides many networking opportunities! Registering to Exhibit is just the beginning. Plan to attend the educational sessions that would be of interest to your target audience, as well as the General Session. Also, take time to hang out at the lobby bar at the JW Marriott, as many credit union executives enjoy socializing in this area each evening.

- Educational Sessions
- General Session
- JW Marriott Lobby Bar

**Planning your networking events in advance will help you maximize your time at the show!**

Dinner, Dance, & Silent Auction – June 18, 6:30 p.m. – 11 p.m.

Name of Persons Attending: \_\_\_\_\_

\_\_\_\_\_ person(s) at \$95 each

*(Required)*

\_\_\_\_\_  
\_\_\_\_\_

Dance & Silent Auction Only – June 18, 8 p.m. – 11 p.m.

Name of Persons Attending: \_\_\_\_\_

Total: \_\_\_\_\_

*(Required)*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ person(s) at \$40 each

Total: \_\_\_\_\_



### NEW IN 2010!

- Winter Garden Cultural Tour \$100 per person  
June 17, 8:45 a.m. – 3 p.m.
- Golf Alternative: Airboat Adventure \$95 per person  
June 18, 8 a.m. – 11:45 a.m.

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## Payment Information (required):

Company Name: \_\_\_\_\_

Contact Name for Accounting Questions: \_\_\_\_\_

Contact Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

## Payment Summary

- Golf Tournament (\$200 per player) \$ \_\_\_\_\_
  - Golf Alternative: Airboat Adventure (\$95 per person) \$ \_\_\_\_\_
  - Dinner, Dance, & Silent Auction (\$95 per person) \$ \_\_\_\_\_
  - Dance & Silent Auction Only (\$40 per person) \$ \_\_\_\_\_
  - Winter Garden Cultural Tour (\$100 per person, *Includes Lunch*) \$ \_\_\_\_\_
- Total \$ \_\_\_\_\_

## Payment Options

Invoice Me    or     Credit Card

### CREDIT CARD AUTHORIZATION

VISA     MasterCard

\_\_\_\_\_  
*Credit Card Number* *Expiration Date*

\_\_\_\_\_  
*Cardholder's Billing Address*

\_\_\_\_\_  
*City/State/Zip*

\_\_\_\_\_  
*Print Name*

\_\_\_\_\_  
*Authorized Signature*

\_\_\_\_\_  
*V Number (three digit number found on back of card)*



Return original with payment, and be sure to make a copy for your records.

Mail to: LSCU  
Attn: Accounting - 2010 Exhibits  
P.O. Box 3108  
Tallahassee, FL 32315-3108

Fax to: 850.558.1105  
Email: expo@lscu.coop