

**National Center for Women and Policing
TENTH ANNUAL LEADERSHIP TRAINING CONFERENCE**



EXHIBITOR FAX OR MAIL REGISTRATION FORM

Conference Name: 2005 Annual NCWP Conference	Conference Date: April 24-27, 2005
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Registration includes one exhibitor badge, Welcome reception, Awards Night Dinner, one lunch, and morning coffee

Your Name: _____

Your Agency/Company Name: _____

Address: _____

City: _____ State: _____ Zip: _____ Country: _____

Phone: _____ Fax: _____ Email: _____

Position/Job Title _____ Name _____
(As it should appear on the Exhibitor Badge)

Check Enclosed- Check Nr. _____

Circle Credit Card Type: MC VISA AMEX Number: _____ Expiration Date: _____

Authorized by: _____ Title: _____
(Signature)

Conference Fees

Quantity	Description	Fee (each)	Amount
_____	Vendor Booth	\$500.00	_____
_____	Guest Tickets, Banquet	\$55.00	_____
_____	Guest Tickets, Off-Site	\$55.00	_____
TOTAL Vendor Fees			_____

Telephone, Fax or Mail Your Registration Information to
NCWP Conference Registration
P.O.Box 1480
Edgewater, MD 21037
410-451-0002 x 202 Fax: 410-451-7373