

PLEASE PRINT:

FIRST NAME / M.I. / LAST NAME

CITY / STATE, PROV.

JOB TITLE

ZIP/POSTAL CODE

COUNTRY

COMPANY NAME

PHONE

FAX

MAILING ADDRESS

E-MAIL ADDRESS

IMPORTANT: Your e-mail address will NOT be released to exhibitors. Your e-mail address is used to send a confirmation and show information.

Your firm's primary product/service (SELECT ONE—PRINTED ON BADGE)

- End Buyer Categories:**
- Manufacturer
 - Retailer/Food/Lodging Services
 - Financial/Insurance/Real Estate
 - Medical/Pharmaceutical/Healthcare
 - Media/Publishing/Internet
 - Transportation/Communications/Utilities
 - Services (Business or Professional)
 - Other End Buyer
Please Specify _____

- Reseller Categories:**
- Incentive Company
 - Promotional Products Distributor
 - Ad/Marketing/Sales Promo Agency
 - Meeting Planner
 - Travel Agency/Fulfillment
 - Incentive Representative
 - Catalog/Mail Order
 - Other Reseller
Please Specify _____

Non-Exhibiting Supplier Categories: Fee: \$495 per badge

- Incentive Manufacturer
- Travel Service Supplier

Is this your first time attending?

- Yes No

What is your title (Select one only)

- President/Owner/CEO/COO/Chairman
- Sales/Marketing VP, Director or Manager
- HR/Training Director or Manager
- Advertising/Sales Prom Director/Manager
- Meeting/Convention/Travel Manager
- Purchasing/Production Manager
- Event Planner/Marketer/Sponsorship Manager
- Other _____

What is your involvement with incentives/meetings (Check all that apply)

- Recommend
- Purchase
- Approve
- None

Your involvement includes (Check all that apply)

- Merchandise Incentives/Awards
- Promotional Products/Ad Specialties
- Gift Cards/Debit Cards
- Travel Incentives
- Meeting Services/Sites
- Event Marketing/Services

What incentives do you use, or plan to use (Check all that apply)

- Dealer/Sales Incentives
- Consumer Promotions
- Employee Recognition/Awards
- Business/Corporate Gifts

Merchandise you use, or plan to use (Check all that apply)

- Apparel
- Appliances
- Automotive
- Awards/Trophies
- Books/Tapes/CD's
- Cameras
- Cleaning and Floor Care
- Clocks
- Computers
- Crafts/Hobbies
- Electronics
- Food/Beverage
- Giftware
- Health/Beauty
- Home Furnishings
- Housewares
- Inflatables
- Jewelry
- Lawn/Garden
- Leather Goods & Accessories
- Linens/Domestics
- Luggage
- Office Equipment
- Optical Goods
- Patio
- Personal Accessories
- Personal Care
- Pet Supplies
- Recreation/Leisure
- Security/Safety
- Smokers' Products
- Sporting Goods
- Telephone/Communications
- Tools/Hardware
- Toys/Games
- Travel Specialties
- Watches
- Writing Instruments

Travel/meeting destinations you use, or plan to use (Check all that apply)

- Domestic USA
- Canada, Mexico & Caribbean
- Europe
- Pacific/Asia
- Africa/Middle East
- South/Central America

What is your travel/meeting special interest (Check all that apply)

- Golf Facilities & Products
- Gaming Facilities
- Cruises
- Adventure Travel

What is your travel/meeting group size (Check all that apply)

- Individual Travel
- Under 50
- 50-199
- 200-500
- Over 500

What is your annual expenditure for incentive programs, meetings, business gifts and promotional products (Check one only)

- Under \$25,000
- \$25,000 to \$99,999
- \$100,000 to \$499,999
- \$500,000 to \$999,999
- \$1,000,000 to \$5,000,000
- More than \$5,000,000

EXHIBIT HALL (Included in Full Conference)

FREE by September 21, \$20 after September 21, \$40 onsite

\$ **FREE**

NOTE: Non-Exhibiting Supplier fee is \$495 per badge.

SEMINARS (Indicate Session # below)

Date/Time	9:00-10:15am	10:30-11:45am	2:00-3:15pm	3:30-4:45pm
Tuesday, October 12				
Wednesday, October 13				
Thursday, October 14				

Full Conference: \$295 by September 21, \$350 after September 21 (Includes up to ten (10) seminars, keynote luncheon and the exhibit hall) \$ _____

Individual Seminars: \$75 by September 21, \$95 after September 21
 No. of Seminars _____ @ \$ _____ = \$ _____

KEYNOTE LUNCHEON (Included in Full Conference)

Fee: \$45 by September 21, \$55 after September 21

Date/Time

Tuesday, October 12 **12:00-1:45pm**

No. of tickets _____ @ \$ _____ = \$ _____

TOTAL AMOUNT DUE

\$ _____

PAYMENT INFORMATION: Full payment required before processing.

Method of Payment: Visa MC Amex Discover
 Check (payable: *The Motivation Show*)

CARD NO. _____ EXP. DATE _____

NAME ON CARD _____

SIGNATURE _____
 I agree to pay the above amount according to my card issuer agreement.