



# FALL 2010 CONFERENCE

Sept. 29, 2010

## REGISTRATION FORM

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

Phone \_\_\_\_\_

Email \_\_\_\_\_

**ATTENDEES**

Shirt size

1	_____	_____
2	_____	_____
3	_____	_____
4	_____	_____
5	_____	_____

(For golf shirt - must be postmarked by 9-10-10)

**Registration Fee**

Post marked on or before 9/14/10 -- \$30 / person

After 9/14/10 -- \$50 / person

Total Enclosed \$ \_\_\_\_\_

MAKE CHECKS PAYABLE TO: *NEISMA, INC.*

Mail to: *NEISMA, INC.,  
P.O. BOX 814,  
READING, MA 01867*