

REGISTRATION FORM

CHAIN REACTION:

IMPLEMENTING COLLABORATIVE SUPPLY CHAIN RELATIONSHIPS

OPRYLAND CONVENTION CENTER, NASHVILLE, TN • OCTOBER 26-28, 2003

To register on line, go to www.fmi.org, select Chain Reaction Conference, click "register online" and follow the instructions. Mail to: Food Marketing Institute • P.O. Box 85080, Lockbox #4317, Richmond, VA 23285-4317 or fax this form with credit card information to (202) 220-0878. Registration questions? Contact Elizabeth Newton at enewton@fmi.org

PLEASE PRINT

Company _____ Member #: _____

Mailing Address _____

City _____ State/Province _____ Zip/Postal Code _____ Country _____

Phone: Area (____) No. _____ Fax: Area (____) No. _____ E-Mail _____

Confirm to _____ Title _____

Last Name _____ First Name _____ Badge Name _____ Title _____

☐ Mr. ☐ Mrs. _____

☐ Mr. ☐ Mrs. _____

☐ Mr. ☐ Mrs. _____

1 ☐ FMI Members*: \$650. per person

2 ☐ \$600. per person if three or more paid registrants attend from the same FMI member company

4 ☐ FMI Associate Member*: \$1,200. per person⁺

6 ☐ All others: \$1,430. per person⁺

* Every participant – to qualify for FMI member rates – must be an employee of an FMI-member company. Please remember an FMI member is either a retailer or wholesaler paying annual dues to FMI. Associate members are supplier company paying annual associate member dues to FMI.

⁺ For every two registrants from the same company paying the \$1200 or \$1430 registration fee, one complimentary retailer/wholesaler registration will be awarded. This registration can be used at the qualifying company's discretion to invite a retailer/wholesaler to attend the Chain Reaction Conference as their guest.

NOTE: Payment is required in advance to attend conference. Walk-in registrations will only be accepted if accompanied by cash, company check or credit card in payment of the registration fee. Sorry, we cannot bill.

CANCELLATIONS: Full refund if notification is received prior to one week before meeting; 60 percent refund if less than one week's notification. NO REFUND IF NOTIFICATION IS RECEIVED AFTER OCTOBER 24.

☐ Enclosed is my check (U.S. funds drawn on a U.S. bank— payable to Food Marketing Institute) for my registration fees. Wire transfers acceptable in U.S. funds.

☐ Please charge \$_____ to my: ☐ Visa ☐ MasterCard ☐ American Express ☐ Discover Card

Account No. _____ Exp. Date _____

Card Holder Name (please print) _____

Card Holder Signature (must sign to be valid) _____

Note: Please make room reservations directly with the Opryland Convention Center 1-(888) 777-6977 by October 3, 2003.

 FMI/GMA is committed to participation in its programs by persons with disabilities. ☐ Please check if you need accommodations. Please specify _____

