



ILR RESEARCH CAMP REGISTRATION FORM

JULY 21st AND 22nd, 2008

REGISTRATION FEE

	"Early Bird" (Before July 7th)	Regular Registration
Lotteries	\$750 Each Additional Attendee \$650	\$1,000 Each Additional Attendee \$900
Lottery Vendors	\$1000 Each Additional Attendee \$900	\$1,200 Each Additional Attendee \$1,100
Past Attendees	\$650	\$900

**Price includes lunch both days *Participants receive a framed diploma*

Lotteries: _____ # of tickets \$ _____

Lottery Vendor: _____ # of tickets \$ _____

Payment Type: Credit Card* Check**

Credit Card Type: Visa Master Card

American Express

Name that appears on the card: _____

Card Number: _____ - _____ - _____ - _____

Security Code (3-digit number on back): _____ **Exp. Date:** _____

Billing Address: _____

Signature: _____ **Date:** _____

Please list the names and information of all attendees.

1. Name _____ Title _____

E-mail _____ Phone (_____) _____

2. Name _____ Title _____

E-mail _____ Phone (_____) _____

3. Name _____ Title _____

E-mail _____ Phone (_____) _____

**If paying with a credit card, you may fax in the registration form.*

***Checks should be made payable to Leo J. Shapiro & Associates, LLC and mailed in with the registration form.*

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