

REGISTER NOW!



NCCMP 2009 Annual Conference

October 5 – 7, 2009

Caesars Palace
3570 Las Vegas Boulevard South
Las Vegas, NV 89109

Conference Events

Monday, October 5 –
Wednesday, October 7, 2009

- Morning General Sessions and optional afternoon Workshops featuring the leading experts in the Multiemployer community

Pre-Conference Functions

Saturday, October 3, and
Sunday, October 4, 2009

- Saturday Specialty Seminar for the Trustees and their Advisors
- Sunday NCCMP Annual Charity Golf Outing & Evening Welcoming Reception

EARLY BIRD MEMBER RATE: \$925

After September 3rd MEMBER RATE: \$1,000

EARLY BIRD NON-MEMBER RATE: \$1,025

After September 3rd NON-MEMBER RATE: \$1,200

REGISTER EARLY! HOTEL SPACE IS LIMITED

DETAILED PROGRAM AGENDA WILL BE FORTHCOMING

Hotel Accommodations:

A room block at conference room rate per day of \$205.00 plus Clark County Room Tax (9%) has been reserved at Caesars Palace and offered (3) days prior and (3) days after the meeting dates.

To make your room reservations please call: (866) 227-5944 and ask for the group rate for the NCCMP.

The cut – off date for room reservations at the conference rate is Thursday, September 3, 2009.

Conference Registration Cancellations received in writing are accepted without penalty through September 17, 2009. A penalty of \$150 will be charged for all cancellations received after that date. All refunds will be processed after the conference.

SPONSORS/EXHIBITORS

DO NOT FILL OUT THIS FORM

For Sponsorship/Exhibitor opportunities and details, please contact Margaret Tobin via e-mail: mtobin@nccmp.org

NCCMP 2009 CONFERENCE REGISTRATION

- EARLY BIRD MEMBER RATE:** \$925
 After September 3rd—Member Rate: \$1,000
- EARLY BIRD NON-MEMBER RATE:** \$1,025
 After September 3rd—Non-Member Rate: \$1,200

METHOD OF PAYMENT:

- Check or Credit Card

CREDIT CARD TYPES ACCEPTED:

(Please circle one)

AMEX VISA MasterCard

Credit Card No.:

Expiration Date:

Cardholder Name:

Cardholder Signature:

**If paying by credit card, please provide billing address on separate paper if different from mailing address.*

PLEASE SEND COMPLETED REGISTRATION WITH PAYMENT TO:

NCCMP 815 16th Street, N.W., Washington, DC 20006

QUESTIONS? Tel: (202) 737-5315/Fax: (202)737-1308

E-mail: MTOBIN@nccmp.org

First Name

Last Name

Job Title

Organization

Membership Number

Mailing Address:

Phone:

Fax:

E-Mail