

*Please print and return by e-mail, regular mail or fax.*

*Please note that the information below is how you will be identified on your badge and on the list of participants.*

Date: October 6, 2006

Place: Joan B. Kroc Theatre for the Performing Arts

Ray and Joan Kroc Corps Community Center, 6605 University Ave, San Diego, CA

## **1. Participants information**

Title: ≤ Mr. ≤ Ms. ≤ Mrs. ≤ Prof. ≤ Dr. ≤ other: \_\_\_\_\_

\*Last name: \_\_\_\_\_

\*First name: \_\_\_\_\_

\*Organization: \_\_\_\_\_

Position: \_\_\_\_\_

\*Address: \_\_\_\_\_

\*Zip code: \_\_\_\_\_ \*City: \_\_\_\_\_

\*State: \_\_\_\_\_

\*Telephone: \_\_\_\_\_

Fax: \_\_\_\_\_ \*E-mail: \_\_\_\_\_

≤ Center For Social Profit Leadership Faculty

\* Required Fields – All further correspondence will be via email.

## **2. Conference Fee**

Conference fees include admission to conference sessions, two lunches, proceedings, registration materials and entrance to receptions and boat-trip.

	<b>Before September 11, 2006</b>	<b>After September 11, 2006</b>
Social Entrepreneur/Social Enterprise Leaders Fee with paid corporate sponsor	\$0.00	\$0.00
Social Entrepreneur/Social Enterprise Leader Fee w/out corporate sponsor	\$100.00	\$150.00
Student conference fee*	\$35.00	\$50.00
Student conference fee with paid sponsor	\$ 0.00	\$ 0.00
Corporate/Foundation Support Fee Includes entrance fee for 1 social entrepreneur/social enterprise leader or up to three students	\$200.0	300.00

### **3. Payment**

#### **Payment information**

Conference fee: \$ \_\_\_\_\_

**Total fees:** \$ \_\_\_\_\_

I will pay the amount:

≤ By credit card: You may pay by credit card via our website [www.legacyxxi.com](http://www.legacyxxi.com) using our click and pledge option - MasterCard, Visa and American Express are accepted.

Credit card number: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Expiration date: \_\_\_\_\_ / \_\_\_\_\_

Cardholder Name: \_\_\_\_\_

≤ By check:

Fax # 323.463.4082

**Snail Mail to: 2401 Creston Dr. Los Angeles, CA 90068**

### **4. Additional Instructions**

**Deadlines:** Prepaid Advanced Registration must be electronically submitted, faxed or mailed no later than **September 11, 2006**. Please use one form per person. If you should have problems registering, please contact the

Conference office at [rschultz@socialprofitleadership.org](mailto:rschultz@socialprofitleadership.org)

**Payment Information:** Registration forms must be accompanied by full payment in order to be processed. Incorrect credit card numbers and declined credit are considered non-payments and registration will not be accepted. No registrations will be accepted by telephone.

**Refund policy:** The Conference Office should be notified of cancellations in writing.

If the Conference Office receives cancellations before September 15, 2006 the total conference fee will be refunded, less \$25.00 administration costs. After September 15, 2006 no refunds will be made. Please note that refunds will only be made after the conference. No shows are non-refundable and are liable for the full registration. If you cannot attend, you may send a substitute person. The original registrant must submit a written authorization for such a change.

**Confirmation:** Please allow up to 10 days for mailed confirmation of your registration.

By sending in this registration form, I acknowledge that I commit myself to the immediate payment of the full conference fee. I have taken notice of the cancellation terms on this form.

Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Signature: \_\_\_\_\_