SHOWCASE REGISTRATION

PTA & NYSTA 12th Annual Showcase & Conference

October 1 – 3, 2008

The Penn Stater Conference Center

COMPANY: _____ _____

(as it should appear in program and signs) **CONTACT PERSON**

_____

ADDRESS/CITY/STATE/ZIP

_____

PHONE **FAX** **E-MAIL**

Member of: **[ ] PTA** **[ ] NYSTA** **[ ] Both**

PARTICIPATION IN THE SHOWCASE REQUIRES MEMBERSHIP IN EITHER ONE OF THE ASSOCIATIONS.

SPONSORS

[ ] **Nittany Lion Sponsor:** money from this sponsorship will be used toward miscellaneous showcase functions, such as additional food, etc.	$150	$_____
[ ] **Receptions** (**FULL**)	Full Sponsor Co-Sponsor	

TOTAL PAYMENT DUE (Sections I, II, III, & IV) $_____

PAYMENT AND SUBMITTING FORMS

Mail, Fax, E-mail or File Online
at www.patel.org

FAX: 717-238-5352

E-mail: sue.carter@patel.org
and trudy.todd@patel.org
(please e-mail to both)

PAY BY CREDIT CARD (Visa or Mastercard)
(see below)

PAY BY CHECK: Make Payable and mail to:

Pennsylvania Telephone Association
P.O. Box 1169 (30 North Third Street, Suite 300)
Harrisburg, PA 17108-1169 (17101)

PAYMENT: ____ CHECK ENCLOSED _____ CHECK WILL BE SENT BY THE 9/12 DEADLINE

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You have my permission to charge my card the amount shown on page 2 – TOTAL PAYMENT_____
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