



## CONFERENCE REGISTRATION FORM

### 2007 COMMUNITY PHILANTHROPY ACADEMY

**TUESDAY, FEBRUARY 20, 2007**  
**10:00 am to 4:30 pm**

**The Hotel Fort Des Moines**  
**Convention Level II**  
**1000 Walnut Street**  
**Des Moines, IA 50309**

**Make Checks Payable to:**  
**ISU Dept. of Economics – CVC**

**SEND PAYMENT TO  
REGISTRATION  
COORDINATOR:**

**Becky Johnson**  
**Community Vitality Center**  
**478 Heady Hall**  
**Iowa State University**  
**Ames, IA 50011**

**Telephone: (515) 294-3000**  
**Fax: (515) 294-3838**

#### REGISTRATION INFORMATION:

*Iowa State University requests this information to preregister you in a conference. No one outside the university, with the exception of participants in this conference, is routinely provided this information. If you fail to provide the required information, we cannot promise accurate registration. (Reference Iowa Code, Chapter 22:11; Iowa Fair Information Practices Act.)*

First & Last Name (Please Print) \_\_\_\_\_

Organization or Company: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

**Will You be a Speaker at the Conference?** \_\_\_\_ Yes \_\_\_\_ No  
*(Registration Fee is Not Required for Speakers)*

**Will You be Attending Lunch?** \_\_\_\_ Yes \_\_\_\_ No

**REGISTRATION FEE BY FEBRUARY 13<sup>th</sup> - \$40 per person**

**REGISTRATION FEE AFTER FEBRUARY 13<sup>th</sup> - \$50 per person**

**PAYMENT MUST BE ENCLOSED:**

**Total \$ \_\_\_\_\_**

***(Sorry – No Credit Cards Accepted)***

**CONFERENCE  
COORDINATOR:**

**Mark Edelman**  
**477 Heady Hall**  
**Iowa State University**  
**Ames, IA 50011**

**Telephone: (515) 294-6144**