



**2011 CONFERENCE REGISTRATION FORM
November 09-11, 2011**

Phone: (617) 232-5380 - Fax: (617) 232-9545 - Email: jvanliere@altstaffing.org

CONFERENCE REGISTRATION:

To register for the conference, please supply the following information:

Name and Organization (as you would like it to appear on conference badge):

First Name:
Last Name:
Organization:

Job Title: (optional)

Address:
City:
State:
Zip:

Telephone:
Fax Number:
Email:

FEES include all conference materials, 2 breakfasts, 2 lunches, 2 receptions, and breaks.

	THROUGH Sept 30	AFTER Sept 30
	_____	_____
Alliance Member	\$150	\$200
Non-Member	\$200	\$250

Total Enclosed for Registration:

Make checks payable to **Alternative Staffing Alliance** and mail to:

**Alternative Staffing Alliance
1 Harvard St., #200
Brookline, MA 02445**