Tucson Wednesday, February 8 The Arizona Inn 2200 E. Elm Street Tucson, AZ 85719

7 to 10 am



# 2017 Winter State of the State

Phoenix

Friday, February 10 Pointe Hilton Squaw Peak Resort 7877 N. 16th Street Phoenix, AZ 85020

7:30 to 10:30 am

Non-Member: \$100

#### **PAYMENT INFORMATION:**

Members of The Hertel Report: \$75

Members of a THR Community Partner: \$85

Late Registration (After February 1, 2017): \$125

Advisors to The Hertel Report: \$60

Indicate credit card charge or amount of check enclosed.

Select the SOS Below Phoenix Tucson

Return your registration by February 1, 2017

Complete this form and return to The Hertel Report.

Fax: (866) 639-8754

Email: admin@thehertelreport.com Postal Mail: The Hertel Report

**REGISTRATION INFORMATION:** 

29455 N. Cave Creek Road Suite 118 - Box 453 Cave Creek, AZ 85331 TOTAL to be charged or check enclosed: PAYMENT METHOD:

VISA MasterCard AMEX Check#

Name:

Credit Card #:

Expiration:

Billing Zip Code Verification #:

# V

COMPLETE REGISTRATION LIST

Name, Title, Organization, Email & Phone **PAGE 2** 

Founding Sponsors & Corporate Members Submit Your Complementary Registration

PAGE 2

## THANK YOU FOUNDING SPONSORS

















Winning the fight against cancer, every day.\*\*















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Founding Sponsor 2 Complementary

**Corporate Members** 

(13 to 30 members)

Corporate Members Small & Medium

(1 to 12 members)

Medium, Large & Jumbo

2 Complementary Admissions

1 Complementary Admission

Admissions

7:30 to 10:30 am

## 7 to 10 am

## **ATTENTION Individual Members**

Thank you for registering for the 2017 Winter State of the State.



Return page 1 and this form to complete your registration.

## **ATTENTION Founding Sponsors & Corporate Members**

Thank you for registering for the 2017 Winter State of the State. Please use this form to register individuals from your organization attending the Phoenix and/or Tucson conference(s). Use the membership benefit key to the right to determine how many from your organization will receive a complementary admission to the conference(s). Register additional members of your organization by also including them below.



Email:

Return page 1 and this form to complete your registration for additional attendees.

## Name of Business or Organization

Attendee Name:	Title:
Email:	Phone:
Attendee Name:	Title:
Email:	Phone:
Attendee Name:	Title:
Email:	Phone:
Attendee Name:	Title:
Email:	Phone:
Attendee Name:	Title:
Email:	Phone:
Attendee Name:	Title:

Phone: