



Montana Automobile Dealers Association

2010 Montana Automobile Dealers Association Sponsor Registration October 6-8, 2010



Business Name _____

Address _____

City _____ State: _____ Zip Code: _____

Business Phone _____ Business Fax _____

E-Mail: _____ Website: _____

Attendee Name _____ Attendee Name _____

Attendee Name _____ Attendee Name _____

Fees:

Convention Attendee(s) : _____ x \$200 = _____

Sponsorship Amount: \$ _____

Master Card/Visa Accepted

Card Number _____ Expiration Date _____

Signature _____

Please make all checks payable to MTADA

Hotel Rooms:

All room reservations must be made directly with the Hilton Garden Inn Great Falls. Please call (406) 452-1000 or fax your reservation request to prior to September 1st.

Registration Policy:

All registration forms must be accompanied by full payment. Registrations received after September 15 will be \$225 per participant. Cancellations received after September 15 will receive a refund of 50% of total registration fee.

We Plan to Attend the Following Functions:

Table with columns for Wednesday, Thursday, Friday and # Attending. Rows include Welcome Reception, Breakfast, NADA Luncheon, Trade Show & Reception, Breakfast Buffet, Luncheon, Spouses Luncheon, President Reception & Banquet.

Please mail registration form with payment to: Montana Automobile Dealers Association 501 North Sanders Helena, MT 59601 Fax: (406) 449-0119