

2018 CBOF ATTENDEE REGISTRATION FORM

REGISTER ONLINE

OR

DOWNLOAD E-FORM

First Name		Last Name		Date
Title				
Company/Organization				
Address				
City	State	Zip	Country	
Telephone ()	Fax ()	Email		
MARKETING INFO (DETAILS BELOW MAY BE PUBLISHED)				
Company Contact			Contact Phone	
Contact Title			Contact Email	
Website			Twitter: @	

SELECT YOUR CATEGORY BELOW:

- C1 | Category 1 - NMSDC Certified Minority Business Enterprise (MBE) in good standing.
- C2 | Category 2 - Supplier, Non-NMSDC Certified. Any MBE without an NMSDC Certification ID#. Any affiliate or resource organization that is neither a buying organization nor a Certified MBE.
- C3 | Category 3 - NMSDC National or Local Corporate Member in good standing.
- C4 | Category 4 - Corporations, Non-Members of the NMSDC. Public or private buying organization that is not a dues-paying member of the National Minority Supplier Development Council.

PLEASE PROVIDE A **ONE SENTENCE** DESCRIPTION OF YOUR COMPANY OR ITS GOODS/SERVICES (FOR PUBLISHING).

SUPPLIERS ONLY: PLEASE SELECT ALL CURRENT CERTIFICATIONS THAT APPLY

- | | |
|--|---|
| <input type="checkbox"/> Chicago Minority Supplier Development Council | <input type="checkbox"/> METRA |
| <input type="checkbox"/> NMSDC Affiliate Council (specify by name) | <input type="checkbox"/> PACE |
| <input type="checkbox"/> _____ | <input type="checkbox"/> Metropolitan Water Reclamation District of Greater Chicago |
| <input type="checkbox"/> Chicago Transit Authority (CTA) | <input type="checkbox"/> State of Illinois: Central Management Services |
| <input type="checkbox"/> City of Chicago | <input type="checkbox"/> Illinois Department of Transportation |
| <input type="checkbox"/> Cook County Government | <input type="checkbox"/> U.S. Small Business Administration 8(a) Certified |

INTERNAL USE ONLY:

Date Received _____	Payment Info _____
Received by Email Fax Mail Direct	_____
Staff _____	Exhibitor (Yes/No) Space #:
Status _____	Level Sponsor (Yes/No) _____

2018 CBOF ATTENDEE REGISTRATION FORM

ONE REGISTRATION FORM PER PERSON. PLEASE SUBMIT A SEPERATE FORM TO REGISTER ADDITIONAL ATTENDEES. FULL CONFERENCE REGISTRATION FEES DO NOT INCLUDE EXHIBITOR FEES. TRADE FAIR EXHIBITOR FEES DO NOT INCLUDE MEALS OR OTHER CONFERENCE EVENT TICKETS.

THREE WAYS TO REGISTER

1. Online
<http://cbof.chicagomsgdc.org>
2. E-Form Submission:
thurley@ChicagoMSDC.org
3. Print and Fax
Fax No: (312)755-8892

First Name		Last Name		Date
Title				
Company/Organization				
Address				
City	State	Zip	Country	
Telephone ()	Fax ()	Email		
Email a Copy of Acknowledgment to				
Nickname for Badge			NMSDC Affiliate (if applicable)	

SELECT ONE TO BE ELIGIBLE FOR THE DISCOUNT NMSDC-CERTIFIED YES NO

IF YES, PLEASE SUPPLY YOUR FEDERAL EMPLOYER ID NUMBER _____

NATIONAL CORPORATE MEMBER LOCAL CORPORATE MEMBER

ALTERNATE MEAL REQUEST

Vegetarian/Vegan No Nuts Gluten-Free

	ADVANCED REGISTRATION 1/1/18 - 3/1/18	STANDARD REGISTRATION 3/2/18 - 4/13/18	LATE/ON-SITE REGISTRATION AFTER 4/13/18	SELECTION TOTALS
FULL CONFERENCE REGISTRATION				
C1 NMSDC MBEs	\$425	\$490	\$510	
C2 Other Suppliers, Affiliates	\$425	\$490	\$510	
C3 Corp Member	\$425	\$490	\$510	
C4 Corp Non-Member	\$450	\$515	\$535	
ADDITIONAL EVENT TICKETS				
Workshop Luncheon	\$85	\$100	\$100	
Sponsors Breakfast	\$150	\$175	\$225	
C1-C3 Trade Fair (walkthrough)	\$200	\$225	\$250/\$300**	
C4 Trade Fair (walkthrough)	\$225	\$250	\$325	
RESERVED TABLES				
Sponsors Breakfast - Reserved (10 Seats)	\$1,500	\$1,750	\$1,750	
EXHIBITOR SPACE (STANDARD 10' X 10')				
C1 NMSDC MBEs	\$1,000	\$1,250	\$1,250	
C2 Other Suppliers, Affiliates	\$1,250	\$1,500	\$1,500	
C3 Corp Member	\$1,500	\$1,850	\$1,850	
C4 Corp Non-Member	\$1,750	\$2,050	\$2,050	
Exhibitor Space Expansion Fee	\$850	\$850	\$850	
Newly Certified MBE Special++	\$850	\$850	N/A	
RESOURCE GUIDE MAGAZINE ADS				
Inside Front Cover (8.5" x 11")	\$2,500	\$2,500	N/A	
Inside Back (8.5" x 11")	\$2,500	\$2,500	N/A	
Full Page (8.5" x 11")	\$2,000	\$2,000	N/A	
Half Page - Horizontal (8.5" x 5.5")	\$1,000	\$1,000	N/A	
Half Page - Vertical (4.25" x 11")	\$1,000	\$1,000	N/A	
REGISTRATION TOTALS				

***PAID REGISTRATION IS NON-REFUNDABLE.** FULL PAYMENT MUST ACCOMPANY REGISTRATION FORM. Pay by certified check, money order or credit card. Make checks payable to the **Chicago Minority Supplier Development Council**. Discounted fees do not apply to invoiced registration. No invoicing after March 1, 2018. ** Prices vary by attendee category type. ++ Special exhibitor pricing applies exclusively to ChicagoMSDC MBEs receiving first time certification during the period of May 2017 - March 2018.

Credit Card Type: <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> American Express <input type="checkbox"/> Discover <input type="checkbox"/> Other Card Holder Name: _____ Credit Card #: _____ Exp. Date: _____ V-Code (security code): _____ Billing Zip Code: _____ Card Holder Signature: _____

Payments received by mail and on-site must be made by certified check, money order or credit card. Full conference rates expire April 24, 2018. Do not submit paper or e-form registrations after March 30, 2018. Single event tickets will be available online until April 13, 2018. ALL PAID REGISTRATIONS ARE FINAL, NON-REFUNDABLE. No-shows or unused tickets are not eligible for refunds. Please return this completed form and amount due to: Director of Events, Chicago Minority Supplier Development Council.