

12th Annual Recruitment & Retention Conference
“FFMT and You: Embracing Florida’s Educational Success and Impacting its Future”
April 5-6, 2008
Rosen Plaza Hotel
Orlando, FL



District Representative

Note: Please only register the attending Representative(s). Only names listed on the registration will be provided a name badge and access to the Recruitment Hall. Please notify our office immediately of name changes.

Name _____

School District/Company Name _____

Mailing Address _____

City _____ Zip Code _____

Phone # (_____) _____ Email _____

Second District Representative

Name _____

School District/Company Name _____

Mailing Address _____

City _____ Zip Code _____

Phone # (_____) _____ Email _____

<p>Will you be attending the reception on Friday, April 4? ___ Yes ___ No Number Attending _____</p> <p>Will you be attending the Recruiter’s Orientation Luncheon on Saturday, April 5? ___ Yes ___ No Number Attending _____</p>
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The cost of two representatives to attend the conference is \$175.00, which includes breakfast, lunch and dinner. There is a \$50.00 charge for each additional representative. If you have more than two representatives that will attend, please complete the second page of this pre-registration form. *Please return by October 30th.* This information will assist FFMT with proper setup of the Recruitment Hall.

Mail Pre-Registration Forms to:
FFMT, Inc.
Attn: Conference Coordinator
P.O. Box 117045
Gainesville, FL
32611-7045

Fax Forms to:
Attn: Conference Coordinator
(352) 846-3011

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Additional Representatives

Note: Please only register the attending Representative(s). Only names listed on the registration will be provided a name badge and access to the Recruitment Hall. Please notify our office immediately of name changes.

Name _____

School District/Company Name _____

Mailing Address _____

City _____ Zip Code _____

Phone # (_____) _____ Email _____

Name _____

School District/Company Name _____

Mailing Address _____

City _____ Zip Code _____

Phone # (_____) _____ Email _____

Name _____

School District/Company Name _____

Mailing Address _____

City _____ Zip Code _____

Phone # (_____) _____ Email _____