

COUNCIL ON FOUNDATIONS 2012 ANNUAL CONFERENCE

APRIL 29-MAY 1 • LOS ANGELES

REGISTRATION FORM



COUNCIL *on* FOUNDATIONS

HERE'S HOW TO REGISTER

1. Enter the requested information directly on this form, and click the appropriate boxes to indicate your choices of registration fees, optional events, and payment method.
2. If you are paying by credit card, print the completed form and send it to our secure fax line: 866-914-8107.
3. If you are paying by check, print the completed form and mail it with your payment to: Council on Foundations, Box 75674, Baltimore, Md. 21275-5674.

We will confirm your registration via e-mail within 10 days of receipt, so please be sure to include your e-mail address.

TO MAKE HOTEL RESERVATIONS

The conference takes place at the J.W. Marriott Los Angeles at L.A. Live, 900 West Olympic Blvd., Los Angeles, Calif. 90015. Room rates are \$249 for single or \$269 for double occupancy, plus tax. You can reserve a room [online](#) or call 888-832-9136 and say you are attending the Council on Foundations 2012 Annual Conference.

PERSONAL INFORMATION

Full Name

First Name/Nickname (for badge)

Title

Foundation/Organization

Mailing Address

Bill to Address

City/State/Zip/Country

E-mail

Phone

Fax*

Organization URL*

Blog URL*

Twitter URL*

Facebook URL*

**This information is optional.*

GUEST INFORMATION (IF REGISTERING)

Full Name

First Name/Nickname

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ABOUT YOUR ORGANIZATION

Please select at least one. Check all that apply.

- | | |
|---|---|
| <input type="checkbox"/> Chief Executive | <input type="checkbox"/> Technology Staff |
| <input type="checkbox"/> Senior Staff (Vice President or Managing Director) | <input type="checkbox"/> Communications/Marketing Staff |
| <input type="checkbox"/> Community Foundation Donor Adviser | <input type="checkbox"/> Development/Donor Services Staff |
| <input type="checkbox"/> Finance/Administration/HR Staff | <input type="checkbox"/> Board Member |
| <input type="checkbox"/> Program/Community Leadership Staff | <input type="checkbox"/> Student |
| | <input type="checkbox"/> Consultant |
| | <input type="checkbox"/> Individual Philanthropist |

Are you a...

- ☐ Next Generation Member ☐ First-Time Attendee

For nonmembers only...

Type of organization (community or family foundation, regional association) _____

Year organization was established _____

Organization's approximate assets \$ _____

Organization's approximate annual grant level \$ _____

REGISTRATION FEES

	Through 3/22/2012	On or After 3/23/2012
Full Conference – Member	<input type="checkbox"/> \$800	<input type="checkbox"/> \$950
Full Conference – Nonmember	<input type="checkbox"/> \$1,100	<input type="checkbox"/> \$1,250
Discount for Multiple Registrants <i>(Members Only – Three people from a member organization pay full conference fee; additional registrants eligible for discount.)</i>	<input type="checkbox"/> \$700	N/A
Guest Registration Member	<input type="checkbox"/> \$545	<input type="checkbox"/> \$620
Guest Registration Nonmember	<input type="checkbox"/> \$695	<input type="checkbox"/> \$770
International – Member	<input type="checkbox"/> \$550	<input type="checkbox"/> \$550
International – Nonmember	<input type="checkbox"/> \$800	<input type="checkbox"/> \$800
Student Registration	<input type="checkbox"/> \$545	<input type="checkbox"/> \$620
Institute for New Board Members – Member (April 28–29)	<input type="checkbox"/> \$425	<input type="checkbox"/> \$525
Institute for New Board Members – Nonmember	<input type="checkbox"/> \$625	<input type="checkbox"/> \$825

DAY RATES

	Member	Nonmember
Sunday	<input type="checkbox"/> \$390	<input type="checkbox"/> \$540
Monday	<input type="checkbox"/> \$415	<input type="checkbox"/> \$565
Tuesday	<input type="checkbox"/> \$390	<input type="checkbox"/> \$540

CONFERENCE SESSION RECORDINGS

Preconference	Onsite/Post-conference	Nonregistrant
<input type="checkbox"/> \$159	<input type="checkbox"/> \$179	<input type="checkbox"/> \$329

OPTIONAL EVENTS

	Member	Nonmember
Global Philanthropy Reception and Dinner (April 28)	<input type="checkbox"/> \$150	<input type="checkbox"/> \$200
Corporate Philanthropy Opening Session (April 29)	<input type="checkbox"/> \$75	<input type="checkbox"/> \$125
Register for both and save \$25	<input type="checkbox"/> \$200	<input type="checkbox"/> \$300
A Global Engagement: Widening Your Grantmaking Lens (April 28)	<input type="checkbox"/> \$95	<input type="checkbox"/> \$125
Register for the Global Philanthropy Reception and Dinner and A Global Engagement and save \$25	<input type="checkbox"/> \$220	<input type="checkbox"/> \$270
Saturday Night at the Movies (April 28)	<input type="checkbox"/> \$25	<input type="checkbox"/> \$25
Post-Pacific Standard Time: Art in L.A. 1945–80 (April 28)	<input type="checkbox"/> \$30	<input type="checkbox"/> \$30
Monday Night at the Movies (April 30)	<input type="checkbox"/> \$50	<input type="checkbox"/> \$50

PAYMENT

Total Fees \$ _____

REGISTRATION CANCELLATION

All cancellations must be submitted in writing by March 22, 2012. No refunds will be issued for requests received after that date. Fax your cancellation to 703-879-0800 or 703-879-0802 or e-mail to confreg@cof.org.

Cancellation fees will be as follows:

- Cancellation through March 22, 2012 – Full refund minus \$150 administrative fee
- Cancellation on March 23, 2012, or after – NO refund available

SPECIAL NEEDS

Please list any accessibility requirements:

If you have a special dietary need, please check one:

- ☐ Vegetarian ☐ Kosher ☐ Diabetic ☐ Nondairy
- ☐ I do not wish to receive information from grantmaker-service organizations (e.g., regional associations).
- ☐ I do not wish to receive information from exhibitors and sponsors.
- ☐ I do not want the Council to publish my name, title, and organization in the conference registrant list or post this information on its website.

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REGISTRATION PAYMENT

Registrations will not be processed without payment. Only credit card payments may be faxed.

☐ Check enclosed (payable to the Council on Foundations, U.S. funds only)

☐ American Express ☐ Visa ☐ MasterCard

Name on Card

Card No.

Exp. Date

Security Code

Signature of Cardholder

☐ I authorize the Council on Foundations to charge my credit card for the conference fees as indicated. If I have miscalculated the conference fees, I authorize the Council to make the necessary adjustments and to charge my card accordingly.

www.cof.org