

PART 1: ATTENDEE INFORMATION

Please fill out entire registration form completely. (One form per person.)

Part 1: Attendee Information must be completed for registration processing.

- Yes No My Company is a Retailer.
 Yes No My Company is a Member of NRF.
 Yes No I wish to start/renew my **FREE** subscription to *STORES* Magazine.
 Yes No I wish to receive NRF SmartBrief, a **FREE** daily email of retail news.
 Yes No This is my **FIRST** NRF Annual Convention & EXPO.
 Yes No My attendee information can be distributed to exhibitors and sponsors.

NAME: _____ MR. / MRS. / MS.
 JOB TITLE: _____
 COMPANY: _____
 ADDRESS: _____
 ADDRESS 2: _____
 CITY: _____ STATE: _____
 POSTAL CODE: _____ COUNTRY: _____
 PHONE: _____ FAX: _____
 EMAIL: _____

- Title/Level**
 A CEO/Managing Director
 B CFO
 C CIO
 D President/COO
 E VP/Senior Executive
 F Manager/Director
 G Consultant/Analyst
 H Business Development
 I Sales Representative
 J _____ (Other)

- Job Responsibility**
 A Allocation & Planning
 B Credit Management
 C Customer Relations
 D Finance
 E Human Resources
 F Info Systems/Technology
 G Internal Audit/Risk Control
 H Internet/Interactive
 I Logistics/Supply Chain
 J Loss Prevention
 K Marketing
 L Merchandising
 M Operations/Distribution
 N Store Management
 O Research
 P Store Design
 Q Business Development
 R Consulting
 S Sales
 T _____ (Other)

- Role in Company Purchase Decisions**
 A Final Say
 B Recommend
 C Specify Supplier/Product
 D No Role

- Approximate purchases within the next year on EXPO products/services**
 A Under \$50,000
 B \$50,001 - \$100,000
 C \$100,001 - \$250,000
 D \$250,001 or more

- Type of Store OR Business**
 Store Type: (please select 1 from either Store or Business Type)
 BB BigBox/SuperStore
 DS Department
 DI Discount
 EC Electronics
 FC Food
 HD Home/Domestics
 IR Internet/Interactive
 MM Mass Merchants
 PH Pharmacy
 SA Specialty/Apparel
 SH Specialty/Hard Goods
 OT _____ (Other)
Business Type:
 CS Consultant
 IS In-Store Marketing
 MF Manufacturer/CPG
 SD Store Design
 SF Software
 VN Solution Provider
 SC Supply Chain/Logistics
 OT _____ (Other)

PART 2: REGISTRATION FEE SELECTION

Full Registration — includes admission to all sessions, ARIL Luncheon, and EXPO hall.


	Preview By 7/10/09	Early By 10/16/09	Advance By 12/4/09	Standard By 1/8/10	On-Site After 1/8/10
NRF Member	<input type="checkbox"/> \$775	<input type="checkbox"/> \$875	<input type="checkbox"/> \$975	<input type="checkbox"/> \$1,075	<input type="checkbox"/> \$1,275
Non-Member	<input type="checkbox"/> \$1,275	<input type="checkbox"/> \$1,375	<input type="checkbox"/> \$1,475	<input type="checkbox"/> \$1,575	<input type="checkbox"/> \$1,725

Student/Educator — Must provide proof when picking up badge holder. Includes sessions, EXPO, DESiGN \$350
 STUdiO and ARIL Luncheon

NRF Retail Member Team — 10 or more attendees registering at one time.
 Rate per member \$725

EXPO & STUDIO Pass — Access to EXPO & DESiGN STUdiO only.
 Retailer **FREE**
 Store Designer **FREE**
 Non-Retailer \$250

Please note:
 If you have received an invitation code from an NRF 2010 exhibitor, you may register online. Invitation code is required to complete the online registration process. **The invitation codes may NOT be used by ANY individual employed by an exhibiting or sponsoring company.**

 Please indicate if you require special services. Yes No
 If yes, please list: _____

PART 3: PAYMENT METHOD EIN # 13-5582627

TOTAL AMOUNT DUE: _____ *Check # _____

- PAYMENT METHOD:** Cash **Wire Transfer Amex
 Diners Club Discover MasterCard VISA

CREDIT CARD # _____ EXP. DATE: _____
 NAME ON CARD: _____

BILLING ADDRESS: _____
 CITY: _____ STATE: _____

POSTAL CODE: _____ COUNTRY: _____

*Please make all checks payable to: **National Retail Federation (US DOLLARS ONLY)**
 **Wire Transfer Information For information, please e-mail requests to wiretransfer@nrf.com.
 SIGNATURE

X _____
 Registration not valid without signature and payment.

RETURN THIS FORM WITH PAYMENT TO:
MAIL: NRF 10, PO Box 506, Brookfield, IL 60513-0506
FAX: 708-344-4444 **QUESTIONS? CALL:** 708-486-0725

Visit our website at
www.nrf.com/annual10

REGISTRATION POLICIES

Registrations will not be processed without **FULL PAYMENT**. Payment must be made by check, money order, or credit card. Payment in U. S. dollars only please!

GENERAL RULES—No person under the age of 18 will be admitted into the exposition. No cameras or videos allowed.

CANCELLATIONS—All cancellations must be made in writing. Cancellations for conference registration postmarked by 12/11/09 will receive a 100% refund less a \$100 processing fee. There are no refunds for cancellations postmarked after 12/11/09.

SUBSTITUTIONS—All requests for substitutions must be made in writing with a completed registration form. Additional fees may be required based on the replacement's membership status. No pre-registration substitutions will be accepted postmarked after 12/11/09. Late substitutions will be processed on-site and a \$25 processing fee will apply.

BADGE POLICY—Lost or stolen badges are subject to a \$100 replacement fee. Replacement fees are nonrefundable.