



# Leave for Leaders

## 2012

### Registration

Title \_\_\_\_\_ First Name \_\_\_\_\_ Middle Initial \_\_\_\_

Last Name \_\_\_\_\_ Suffix \_\_\_\_\_

Preferred Name (for nametag) \_\_\_\_\_

Position \_\_\_\_\_ Organization \_\_\_\_\_

Address Line 1 \_\_\_\_\_

Address Line 2 \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Work Phone ( ) \_\_\_\_\_ - \_\_\_\_\_ Home Phone ( ) \_\_\_\_\_ - \_\_\_\_\_

Mobile Phone ( ) \_\_\_\_\_ - \_\_\_\_\_ Fax ( ) \_\_\_\_\_ - \_\_\_\_\_

Email Address \_\_\_\_\_

Conference \_\_\_\_\_ District \_\_\_\_\_

**Please describe your goals for the “Leave for Leaders” session in 200 words or less. Include the questions you want to ask GBOD staff. Please include the names of GBOD staff with whom you wish to meet.**

Please provide up to three possible weeks in order of preference:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

Choose one:

- Lodging at Hampton Inn & Suites @ \$700 (includes 4 nights lodging, breakfast, lunch & Thursday supper)
- Lodging on my own @ \$230 (includes daily lunch & Thursday supper)

**Return completed form, goals statement, and full payment to: Nancy Dunlap, PO Box 340003, Nashville, TN 37203-0003. Please make check payable to “GBOD”.**