

**Crowne Plaza DIA Convention Center
Denver, Colorado
June 8-10, 2009**

FIRST NAME _____ LAST NAME _____

ORGANIZATION/AFFILIATION _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

TELEPHONE # _____ FAX # _____

EMAIL _____

REGISTRATION FEES **REGULAR
5/15/09 - ONSITE**

- GFX Full Conference Pass** \$595 _____
(Includes full conference, keynotes, exhibit hall access, scheduled meals and networking events.)
- GFX Full Conference Pass AND AssetWorks Fleet Software Workshop** \$595 _____
(Includes GFX Full Conference, keynotes, exhibit hall access, all scheduled meals, networking events AND AssetWorks Fleet Software Workshop on Thursday, June 11, 2009.)
- GFX Full Conference Pass AND FASTER Users Fleet Management Workshop** \$795 _____
(Includes GFX Full Conference, keynotes, exhibit hall access, all scheduled meals, networking events AND FASTER Users Fleet Management Workshop on Thursday, June 11, 2009.)
- GFX Full Conference Pass AND INVERS Motor Pool Workshop** \$795 _____
(Includes GFX Full Conference, keynotes, exhibit hall access, all scheduled meals, networking events AND INVERS Motor Pool Workshop on Thursday, June 11, 2009.)
- Spousal Pass:** (Includes meal functions only) \$125 _____

_____ YES I will attend the **Offsite Fleet Facility Tour and Networking Reception, Monday June 8, 2009, 6:00-8:00pm.**

_____ I would like to attend the **Tire Safety and Maintenance Training, Monday June 8, 2009, 2:00-4:00pm.**

Form of Payment:

Make check payable to Government Fleet Expo or complete credit card portion of this form.

Source Code

Check/Money Order AMEX Discover MC Visa P.O. **GRAND TOTAL** _____

CREDIT CARD _____ EXPIRATION DATE _____

NAME ON CARD _____

SIGNATURE _____ DATE _____

I authorize **Bobit Business Media** to charge my account in the amount indicated for registration fees for the Government Fleet Expo and Conference.

- | | | | |
|--|---|---|--|
| <p>1) In what branch of government do you work?</p> <p><input type="checkbox"/> Federal</p> <p><input type="checkbox"/> State</p> <p><input type="checkbox"/> Municipal</p> <p><input type="checkbox"/> County</p> <p><input type="checkbox"/> Not Applicable</p> | <p>2) How many vehicles are in your fleet? (please specify)</p> <p>_____ Cars</p> <p>_____ Light Trucks</p> <p>_____ Vans</p> <p>_____ Medium Trucks</p> <p>_____ Off-Road Vehicle & Equipment</p> <p>_____ Not Applicable</p> | <p>3) Do you service the vehicles in your fleet?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Not Applicable</p> | <p>4) Is your fleet owned?</p> <p><input type="checkbox"/> Leased</p> <p><input type="checkbox"/> Owned</p> <p><input type="checkbox"/> Owned & Leased</p> <p><input type="checkbox"/> Not Applicable</p> |
|--|---|---|--|

Please complete all of the above in order for your registration to be processed.

Full payment must accompany this form. (Sorry, we can not process incomplete registration forms.)

NO ONE UNDER 16 YEARS OF AGE WILL BE PERMITTED TO ATTEND.

Registration Cancellation Policy: There will be a \$75 charge for any name changes or transferring of badges. Refunds will not be granted.