



LILYTOPIA SYMPOSIUM

REGISTRATION FORM

Monday May 24, 2010

To register more than one person, please use a photocopy of this form for each additional registrant.

Registration deadline: May 17, 2010

Pre-registration is required, no-walk-ins, please

Name _____

Company _____

Address _____

City _____ State _____ Zip _____

Phone _____

* Email _____

***Confirmations will only be sent by email**

Please check if **vegetarian option** is requested for lunch.

Registration Fee : \$99.00

Payment:

- Check
- Visa
- Master Card
- Amex
- Discover

CC Number _____

Expiration date _____

Signature _____

Billing Address if different from above _____

Registration fee includes: lunch, refreshment breaks, Business-to-Business networking reception and free admission to Longwood Gardens on the day of the conference. Please make checks payable to Longwood Gardens, Inc. Mail or Fax (credit card only) your registration form (s) to **Continuing Education, Longwood Gardens, P.O. Box 501, Kennett Square, PA. 19348-0501. Fax - 610-388-9806**