



# McKESSON VETERANS' BUSINESS FORUM

Co-Sponsored by American Legion Post 236 and  
the Association for Service Disabled Veterans (ASDV)

## McKesson Veterans' Forum Conference Registration Form

For payment by credit card, please visit the conference section of the ASDV web site or [click here](#).

### CONFERENCE FEES\*:

*(enter number of registrants PER Conference Event)*

\_\_\_\_\_ \$125 – Service Disabled Veteran and Veteran

\_\_\_\_\_ \$150 – Non-Profit Organization

\_\_\_\_\_ \$250 – All Others (*corporate, agency, etc.*)

- No Charge-Patriot Partner or Program Sponsor

### CONFERENCE LOCATION(S):

McKesson Veteran Business Forum

April 2009, San Francisco, CA

National Veterans Entrepreneurship Conference

January 16, 2009, San Francisco, CA

*\*Includes conference luncheon, all sessions and session materials. For exhibit booth registration, please see page 2.*

### Registrant Information

*(All information required. Please write legibly or type. We generate nametags and registration materials from this form.)*

First Name

Last Name

Contact (phone/email):

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

### PAYMENT INFORMATION:

Conference Total \$ \_\_\_\_\_ Number of Registrants: \_\_\_\_\_ Check Number \_\_\_\_\_ Bank \_\_\_\_\_

Name on Account (printed) \_\_\_\_\_

Signature \_\_\_\_\_

Full payment must accompany all registration forms. **Registration requests will not be processed until payment is received.**

### REGISTRANT BILLING AND CONTACT INFORMATION (Required):

Name and title \_\_\_\_\_ Organization \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_ Fax \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_ Zip/Postal Code \_\_\_\_\_

### Make checks payable to:

American Legion Post 236  
401 Van Ness Avenue, Suite 129 & 131  
San Francisco, CA 94102

**MEMO: NVE CONFERENCE**

*For questions about the Conferences contact ASDV and Enterprise Post 236 at (415) 437-1400.*

To pay by credit card, please visit our website conference section and click on "Registration" or [click here](#).





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## EXHIBITOR REGISTRATION FORM

Prefix \_\_\_\_\_ First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Job title \_\_\_\_\_

Business or Agency \_\_\_\_\_

Street Address \_\_\_\_\_ Suite \_\_\_\_\_

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

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_

### Category of Attendee

- Federal Agency     
  Service Disabled Veteran     
  Veteran Owned Business  
 Corporation     
  Non-Profit Organization

Type of Business \_\_\_\_\_

**Yes! I would like to be added to McKesson's Mailing List!\***

(\*ASDV does not sell, loan or print your contact information without authorization.)

**I want to be certified by ASDV. Please send me information about certification!**

### Exhibitor Registration

**Reminder:** Each booth registration comes with one (1) entrance fee for one individual. If you are interested in bringing more participants, you must pay additional registration fee(s) for those individuals. Please see registration form on Page 1.

Please indicate the number of booths:

\_\_\_\_\_ Booths (Service Disabled Veteran/  
Veteran) @ \$250/ each

\_\_\_\_\_ Booths (All Other) @ \$575/ each



Booth Features:

- 10'w x 6'd Area
- 'Pole and Drape' display
- 6 foot table
- two chairs
- Contact us regarding Electricity requests.

TOTAL EXHIBITOR: \$ \_\_\_\_\_

TOTAL REGISTRANTS: \$ \_\_\_\_\_

GRAND TOTAL DUE: \$ \_\_\_\_\_

### Payment Information (Please note: Registration is not complete without payment)

To pay by check, please send this form and your check payable to AMERICAN LEGION POST 236 to:

MCKESSON VETERANS BUSINESS CONFERENCE  
 401 Van Ness Avenue, Suite 131  
 San Francisco, CA 94102  
**MEMO: MCKESSON VETERANS FORUM**

To pay by credit card, please visit our website conference section and click on "Registration" or [click here](#).

To submit registration via fax, fax this form and proof of payment to (415) 252-9705.

