

RETAIL MARKETING CONFERENCE 2010

May 24 – 27, 2010

Gaylord Palms Resort
Orlando, Florida

SAVE UP TO \$300

BY APRIL 30, 2010

Key Code

First Name _____ Last Name _____
 Title _____ Company _____
 Address _____
 City _____ State/Province _____
 Postal Code _____ Country _____
 Phone _____ Fax _____
 Email _____

TO REGISTER: DMA/Retail Marketing Conference
 P.O. Box 27152
 New York, NY 10087-7152

FAX: 708.344.4444

EMAIL: RMC@compusystems.com

For questions call: 866.513.0760/ 708.486.0760

CONFERENCE PACKAGE	Save up to \$300 Feb. 27, 2010 – April 30, 2010	Onsite Price May 24, 2010 – May 27, 2010
MEMBER & AFFILIATE RATES		
Full Conference + Post Conf Workshops (May 24 – 27)	<input type="checkbox"/> \$1,595	<input type="checkbox"/> \$1,895
Full Conference (May 24 – 26)	<input type="checkbox"/> \$1,295	<input type="checkbox"/> \$1,595
Two-Day Conference (May 25 – 26)	<input type="checkbox"/> \$1,095	<input type="checkbox"/> \$1,395
Intensive Only + Exhibition (May 24)	<input type="checkbox"/> \$ 595	<input type="checkbox"/> \$ 795
Daily Conference Pass + Exhibition Tuesday, May 25	<input type="checkbox"/> \$ 595	<input type="checkbox"/> \$ 795
Daily Conference Pass + Exhibition Wednesday, May 26	<input type="checkbox"/> \$ 595	<input type="checkbox"/> \$ 795
Post-Conference Only (May 27)	<input type="checkbox"/> \$ 595	<input type="checkbox"/> \$ 795
Exhibit Hall & General Sessions (All Days)	<input type="checkbox"/> \$ 25	<input type="checkbox"/> \$ 150
NON-MEMBER RATES		
Full Conference + Post Conf Workshops (May 24 – 27)	<input type="checkbox"/> \$1,695	<input type="checkbox"/> \$ 1,995
Full Conference (May 24 – 26)	<input type="checkbox"/> \$1,395	<input type="checkbox"/> \$ 1,695
Two-Day Conference (May 25 – 26)	<input type="checkbox"/> \$1,195	<input type="checkbox"/> \$ 1,495
Intensive Only + Exhibition (May 24)	<input type="checkbox"/> \$ 695	<input type="checkbox"/> \$ 895
Daily Conference Pass + Exhibition Tuesday, May 25	<input type="checkbox"/> \$ 695	<input type="checkbox"/> \$ 895
Daily Conference Pass + Exhibition Wednesday, May 26	<input type="checkbox"/> \$ 695	<input type="checkbox"/> \$ 895
Post-Conference Only (May 27)	<input type="checkbox"/> \$ 695	<input type="checkbox"/> \$ 895
Exhibit Hall & General Sessions (All Days)	<input type="checkbox"/> \$ 25	<input type="checkbox"/> \$ 150
Multichannel Council Reception (May 24)	<input type="checkbox"/> \$ 80	<input type="checkbox"/> \$ 80

Total Conference Registration Fee \$ _____

Cancellation: If you must cancel, please submit cancellations in writing to The DMA Customer Service Department. **Cancellations received before April 23, 2010 will be refunded minus \$150.00 processing fee. Cancellations received after April 23, 2010 will forfeit their registration fee in its entirety. However, you may transfer your registration to someone else without penalty.** No refunds will be issued for any missed sessions or events, including sessions missed due to travel delays or cancellations.

CHOICE OF PAYMENT: (Registration fees will be charged to your credit card upon receipt of your registration form.)

American Express MasterCard Visa Discover Card
 Bank Transfer (Please attach copy) Check # _____
 (Payable to DMA)

Credit Card Number _____ Expiration Date _____

Name of Cardholder (as it appears on card) _____

Company Name (as it appears on card) _____

Cardholder's Signature _____

DEMOGRAPHIC INFORMATION

Your Profile: PLEASE ANSWER ALL QUESTIONS

1. The audience I market to is: (check one)

- Consumer
 Business-to-Business
 Both
 I am a supplier or consultant

2. My title is: (check one)

- President (Owner, Partner, CEO)
 CMO/COO/CIO
 Senior Vice President/VP
 Director
 Manager
 Analyst
 Designer/Writer/Artist
 Coordinator
 Other (please specify) _____

3. The channel I am primarily responsible for is: (check one)

- Email
 E-commerce/Web Site
 Retail
 Catalog
 Social Media
 Other (please specify) _____

4. Your Business Segment is: (check one)

- Business Specialty Products
 Computer & High-tech Products
 Department/BigBox/Superstore
 Food
 Home/Hardware/Gardening Supplies
 Industrial Supplies
 Specialty/Apparel
 Specialty/Hard Goods
 Consultant
 Service Provider
 Agency
 Manufacturer/CPG
 Other (please specify) _____

5. My primary job function is: (check one)

- Branding
 Creative
 Customer Acquisition & Retention

- Interactive Marketing (email, SEM, social networking)

- Marketing
 Merchandising
 Operations/Fulfillment
 Retail Management
 Sales
 Strategy
 Technology
 Other (please specify) _____

6. How many years have you been in the industry? (check one)

- Less than 1 year
 1 – 5 years
 6 – 10 years
 Over 10 years

7. How many people are employed full-time at your company? (check one)

- Less than 50
 51 – 100
 101 – 250
 251 – 500
 500+

8. What role do you play in the purchase of products? (check one)

- Final say
 Specify
 Recommend
 No role

9. Your company's annual gross sales: (check one)

- under \$5 mil
 \$5 – 25 mil
 \$25 – 50 mil
 \$50 – 100 mil
 Over \$100 mil

10. Have you attended ACCM in the past? (check one)

- Yes
 No

11. Pre-registered attendees' names are published in an official show roster. (Deadline 4/24/10)

- Please do not publish my name in the show roster.

 Check here if you have any special requests (which need to meet the Americans with Disabilities Act, dietary requirement, or otherwise). We will contact you.

Please do not include my name in Conference collateral.