



14th Annual Infrastructure Finance Conference

October 27-29, 2009 – Isleta Resort

 Speaker

 Moderator

 Panelist

NMIFC Member:	Name:	Phone:		
Speaker Information				
Speaker Name:				
Speaker Title:				
Affiliation:				
Address:	City:	State:	Zip:	
Phone:	Fax:			
Email:				
Session Title(s):	(1)	(2)	(3)	
Conference Attendance				
Please check off all functions that Speaker will attend	Date(s) of Session(s): _____			
	Full Conference, 10/27-29/09 <input type="checkbox"/> Speaking All 3 Days - No charge <input type="checkbox"/> Speaking 1 or 2 Days but attending Full Conference \$50.00			
	Tuesday, 10/27/09 <input type="checkbox"/> All day/All Functions <input type="checkbox"/> Session(s) Only <input type="checkbox"/> Welcome Social Only	Wednesday, 10/28/09 <input type="checkbox"/> Sessions/Lunch/Social <input type="checkbox"/> Session(s) Only <input type="checkbox"/> Luncheon Only <input type="checkbox"/> Social Only	Thursday, 10/29/09 <input type="checkbox"/> Sessions/Breakfast <input type="checkbox"/> Session(s) Only	
Equipment Needs				
Please indicate which equipment the Speaker has requested	<input type="checkbox"/> None - using own equipment			
	<input type="checkbox"/> Laptop computer <input type="checkbox"/> Internet Connection <input type="checkbox"/> LCD Projector <input type="checkbox"/> Overhead Projector <input type="checkbox"/> Slide Projector <input type="checkbox"/> Other _____	<input type="checkbox"/> Screen <input type="checkbox"/> VCR w/Monitor <input type="checkbox"/> Laser Pointer <input type="checkbox"/> Easel <input type="checkbox"/> Whiteboard w/Markers <input type="checkbox"/> Flip Chart w/Markers	Microphone Preference: <input type="checkbox"/> Wireless Lavalier <input type="checkbox"/> Handheld Wireless	
ADA/Payment Information				
Dietary/Handicap Needs:				
Payment is necessary for those who are speaking 1 or 2 days but attending full conference	<input type="checkbox"/> Check (Paid to NMML) <input type="checkbox"/> Visa or MasterCard	Name on Card: _____ Card #: _____ Expires: _____		

Please return form to:

Jackie Portillo - New Mexico Municipal League
 P.O. Box 846 - Santa Fe, NM 87504
 Phone: (505) 982-5573 or (800)-432-2036
 Fax: (505) 984-1392 Email: jportillo@nmml.org