

# IMPORTANT

## Please Read the Following Information Regarding Registration

### How to Register:



**Online:** Visit [www.nic.org/conference/](http://www.nic.org/conference/) to **register online and save \$50!**



**Mail:** Send completed form and payment (company check or credit card information) to:  
National Investment Center  
ATTN: Registrar  
1997 Annapolis Exchange Parkway – Suite 110  
Annapolis, MD 21401



**Email:** Email completed form with credit card information to: Registrar@nic.org



**Fax:** Fax completed form with credit card information to: (410) 268-4620

### Important Dates:

#### August 6

- **Early Bird Deadline-** Last day to take advantage of discounted rates. In order to receive the Early Bird rate, your paid registration must be received on or before August 6, 2010.
- **Cancellation Deadline-** Cancel by August 6, 2010 to receive a full refund less a \$250 processing fee.  
**Cancellations received after August 6, 2010 are non-refundable.**

#### September 8

- All substitutions after this date must be made on site.

### Cancellation & Substitution Policy

If written notice of cancellation is received by August 6<sup>th</sup>, you will receive a full refund less a \$250 processing fee. Cancellations after August 6<sup>th</sup> are non-refundable. Substitutions are permitted, but must be made on-site after September 8<sup>th</sup>. **Fax cancellations and substitutions to NIC Registrar at (410) 268-4620, or email to Registrar@nic.org.**

NIC reserves the right to make changes to the program. Should circumstances beyond the control of NIC prevent NIC from holding the annual conference as scheduled, and such circumstances occur less than three weeks prior to the conference, registrations will be retained and applied toward the next scheduled NIC conference.

There will be a \$50 fee for all declined credit cards. There will be a fee of \$25 for duplicate registrations—please check with others in your office to be certain that they have not registered you. There will be a \$100 fee for registering in the wrong category.

### Hotel Reservations

The NIC room rate is \$245 per night, single or double occupancy. Once you've registered for the conference, you will receive a confirmation email that will contain the information you will need to book your room at the discounted rate.

*Please note: The hotel reserves the right to cancel rooms of non-registered guests\*. All reservations cancelled within 7 days of arrival will be charged for one room night. Only one room per registered attendee.*

*\*Hotel provides guest information to NIC for verification.*



# 20th Anniversary NIC Conference

## September 22-24, 2010 • Sheraton Chicago Hotel & Towers

### IMPORTANT INFORMATION

- Register online and save \$50! [www.nic.org/conference/](http://www.nic.org/conference/)
- Registration will be capped at 1,600 attendees. All registrations received after this point will be added to a waitlist and registered on a first-come, first-served basis as space becomes available.

### REGISTRATION FEES

	By Aug. 6	After Aug. 6
<b>General Rate</b>	\$1,800	\$2,000
<b>Operator Rate*</b> <i>(1-10 Properties)</i>	\$1,050	\$1,250
<b>Operator Rate*</b> <i>(11+ Properties)</i>	\$1,350	\$1,550

**Operator Group Discounts:** Operating companies will receive the following discounts when submitting group registrations at the same time.

- 3-5 registrants= \$100 off each registration
- 6-10 registrants= \$150 off each registration
- 11+ registrants= \$200 off each registration

\*The Operator Rate (subject to verification) is offered to those actively involved in the day-to-day management operations of a senior living facility and NOT offered to passive investors, passive owners or asset managers.

### STEP 1: PROFESSIONAL CATEGORY

Professional categories are grouped by how you will be represented on-site (badges are color coded for easy networking). **You may only select ONE specific category from the groups listed below.**

SELECT ONE

#### Developer

- Developer

#### Financial Intermediary

- Broker  Loan Servicer  
 Investment Bank

#### Investor-Equity Provider

- Insurance - Life Company  REIT  
 Pension Fund/Manager  Other Institutional Investor  
 Private Equity

#### Lender-Debt Provider

- CMBS  GSE  
 Commercial Bank  Savings Institution  
 Commercial Credit

#### Operator-Provider

- Operator-Provider

If you selected that you are an Operator-Provider please answer the following questions:

1. What is your PRIMARY (one) product type?
 

<input type="checkbox"/> Assisted Living	<input type="checkbox"/> Memory Care
<input type="checkbox"/> CCRC	<input type="checkbox"/> Skilled Nursing
<input type="checkbox"/> Independant Living	
2. How many properties do you operate?
 

<input type="checkbox"/> 1-10	<input type="checkbox"/> 11 or more
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#### Professional Services-Other

- |   |   |
|---|---|
| <input type="checkbox"/> Academic                   | <input type="checkbox"/> Consultant - Other |
| <input type="checkbox"/> Analyst                    | <input type="checkbox"/> Government         |
| <input type="checkbox"/> Appraiser                  | <input type="checkbox"/> Insurance - Risk   |
| <input type="checkbox"/> Association/Industry Group | <input type="checkbox"/> Media              |
| <input type="checkbox"/> Attorney                   | <input type="checkbox"/> Supplier/Vendor    |
| <input type="checkbox"/> Consultant - Market        | <input type="checkbox"/> Other              |

### STEP 2: TELL US ABOUT YOURSELF

#### Badge & Contact Information:

Mr.  Ms.  Mrs. Badge Name: \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Title: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

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

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Attendee's Email: \_\_\_\_\_

Alternate Email: \_\_\_\_\_

*(A copy of the confirmation email will be sent to this address)*

**Have you ever attended a NIC Event?**  Yes  No

**Special Requests:**  Vegetarian Meals  Kosher Meals  
 Accommodations for a Disability

**Is your company sponsoring this conference?**  Yes  No

### STEP 3: NETWORKING OPPORTUNITIES

**Contact Information:** Would you like your full contact information to be listed on the Event Messaging System and on-site *Attendee Listing*?

- YES  
 NO, List name, title, company, city and state only.

**NIC Encourages Pre-Event Networking:** Would you like to send and receive meeting requests through our Event Messaging System?

- YES, I would like to participate. Please provide the email address if different than above: \_\_\_\_\_
- NO, I would not like to send or receive meeting requests.

### STEP 4: FORM OF PAYMENT

- a. A company check made payable to 'NIC' is enclosed.  
Amount: \$ \_\_\_\_\_
- b. Charge my credit card: (All charges are processed online via Verisign Secure Site)  
 American Express  Discover  Mastercard  Visa  
 Card Number: \_\_\_\_\_  
 Expiration Date: \_\_\_\_\_ Name on Card: \_\_\_\_\_  
 Authorized Signature: \_\_\_\_\_

The federal ID number for the National Investment Center for the Seniors Housing & Care Industry, Inc. is 52-1802714. NIC is a nonprofit, tax-exempt, 501(c)(3) corporation.

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Questions? Call NIC at (410) 267-0504 Monday - Friday from 9:00 a.m. to 5:00 p.m. ET or email Registrar@NIC.org