

**CONFR to Go!**  
**Essentials in Fundraising for Boards**

**Registration Form**

**Organization:** \_\_\_\_\_

**Name of Executive Director:** \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Name of Board Chair:** \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Organization Address:** \_\_\_\_\_

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

**Number of Board Members:** \_\_\_\_\_

**Preferred Presentation Date AND Time:**

1<sup>st</sup> Choice: \_\_\_\_\_

2<sup>nd</sup> Choice: \_\_\_\_\_

(Every effort will be made to accommodate one of these choices. The CONFR office will be in touch with you by phone to confirm.)

**Location of Presentation:** \_\_\_\_\_

**Program Fee:** **\$300 for CONFR Members;** \$500 for Non-Members

(We would like to pay for this fee in installments as follows: \_\_\_\_\_)

**Payment by check** made payable to CONFR and mail to: PO Box 3514, Concord, NH 03302.

**Payment by credit card:** (Please circle one) M/C; VISA

Name on Card: \_\_\_\_\_

Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

I agree that our board members will complete a pre-presentation questionnaire, an immediate post-presentation evaluation, and two short follow-up questionnaires at 6 and 12 months post-presentation so we can monitor the success of this program.

**Executive Director Signature:** \_\_\_\_\_; **Date:** \_\_\_\_\_