



**Search Firm Owners Conference hosted by Next Level: February 8-9**

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

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Website: \_\_\_\_\_ Office Location(s): \_\_\_\_\_

Names and titles of all attendees:

- 1. \_\_\_\_\_ Title: \_\_\_\_\_
- 2. \_\_\_\_\_ Title: \_\_\_\_\_
- 3. \_\_\_\_\_ Title: \_\_\_\_\_
- 4. \_\_\_\_\_ Title: \_\_\_\_\_
- 5. \_\_\_\_\_ Title: \_\_\_\_\_

Practice Specialties: \_\_\_\_\_

Number of Employees: \_\_\_\_\_ Number of Search/Recruiting Staff: \_\_\_\_\_

Annual Revenue

	Perm Fee Revenue	Gross Contract Staffing/Temp Revenue
Forecasted 2018		
2017		
2016		
2015		

What Percentage of Your Business is Contingency and Retained / Engaged?

% Contingency: \_\_\_\_\_ % Retained / Engaged: \_\_\_\_\_

**CONFERENCE REGISTRATION – \*Pricing valid through January 1<sup>st</sup>; after that deadline, rates will increase and below pricing will not apply.**

- \$1,250 (Current NLE Subscriber)
- \$1,550 (Not a current NLE Subscriber)

**\*\*Additional people from the same office will be 75% cost.**



**Search Firm Owners Conference hosted by Next Level**

- I authorize Next Level to charge the credit card on file for my NLE Subscription
- I would like to use another card:

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

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

Credit Card Type: \_\_\_\_\_

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

Security Code: \_\_\_\_\_

Billing Zip Code: \_\_\_\_\_

Cardholder Signature: \_\_\_\_\_

**For all registrations, please initial to accept the following policies for the Search Firm Owners Conference:**

- For cancellations on or prior to January 1<sup>st</sup>, you will receive a 50% refund. If cancel after January 1<sup>st</sup>, no refund will be given. You may find another firm to transfer your registration to if you are no longer able to attend.*
- I agree to sharing the names of my attendees, office info, website, locations and revenue (by range) with the other registered and paid attendees of the conference.*

Print Name: \_\_\_\_\_

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

Signature: \_\_\_\_\_

**FAX FORM TO 972-265-5329 or SCAN AND EMAIL TO**  
**[KAREN@NEXTLEVELEXCHANGE.COM](mailto:KAREN@NEXTLEVELEXCHANGE.COM)**