



Consolidated Distributors, Inc.

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Toll Free: (800) 245-9169
Fax: (318) 361-3878
Email: info@cdi-1.com
Website: www.cdi-1.com

ATTENDANCE QUESTIONNAIRE

Supplier

NAME:
TITLE:
COMPANY:
ADDRESS:
TELEPHONE: FAX:
E-MAIL:
GUEST NAME:

- I will be in attendance at the ANNUAL MEMBER/SUPPLIER CONFERENCE of Consolidated Distributors, Inc. to be held at Hyatt Lost Pines Resort & Spa in Austin, Texas on April 26th through April 28th, 2010.
I would like to reserve a booth for the conference (If yes, Booth reservation form must be completed.)
I plan to attend the Opening Session on Monday, April 26th, 2010 from 8:00 a.m. until 9:00 a.m.
I plan to participate in the Annual Member/Supplier Golf Tournament on Monday, April 26th, 2010 at 1:30 p.m. (If yes, Golf Tournament Registration must be completed.)
My guest plans to participate in the Annual Member/Supplier Golf Tournament. (If yes, Golf Tournament Registration must be completed.)
I plan to attend the Opening Reception for Members and Suppliers at 7:00 p.m. on Monday, April 26th, 2010 as a guest of CDI.
My guest will attend the Opening Reception for Members and Suppliers.
I plan to attend the Member/Supplier Lunch Buffet on Tuesday, April 27th, 2010 from 12:30 p.m. – 2:00 p.m. at a cost of \$20.
My guest will attend the Member/Supplier Lunch Buffet on Tuesday, April 27th, 2010 from 12:30 p.m. – 2:00 p.m. at a cost of \$20.
I will attend the Supplier Breakfast on Wednesday, April 28th, 2010 from 7:30 a.m. to 8:30 a.m. as a guest of CDI.
I will attend the Reception and Annual Awards Dinner for Members and Suppliers beginning at 7:00 p.m. on Wednesday, April 28th, 2010 as a guest of CDI.
My guest will attend the Reception and Annual Awards Dinner for Members and Suppliers.

Note: If you did not register online, please return this completed form for CDI by March 25th, 2010 via FAX at: (318)361-3878 or the Email address listed above.