COLLECTORS' CONCLAVE

RESERVATION FORM

Please indicate the type of participation in the COLLECTORS' CONCLAVE you would like:

	ACTIVITY	NUMBER		AMOUNT
❒	**EXHIBITION ENTRY AND DINNER**	_____	**$60 PER PERSON**	**$**_____
❒	**DESIGNATED DINNER TABLE**	_____	**$464 FOR 8 EXHIBITION /DINNER GUESTS**	**$**_____
❒	**EXHIBITION ENTRY ONLY**	_____	**$12 PER TICKET (INCLUDING CATALOG)**	**$**_____
❒	**DISPLAY TABLE**	_____	**$125 /8' x 4' DRAPED TABLE**	**$**_____
❒	**DISPLAY TABLE AND DINNER**	_____	**$175 FOR ONE; $225 FOR A COUPLE**	**$**_____
❒	**COLLECTOR'S LAPEL PIN**	_____	**$15 EACH**	**$**_____

TOTAL **$**

NAME	
ADDRESS	
TELEPHONE/EMAIL	

☐ CHECK/MONEY ORDER
Payable to **COLLECTABLES DIRECT INC.**

☐ VISA ☐ MasterCard ☐ **PAYPAL**

CREDIT CARD ACCOUNT NUMBER

EXPIRATION DATE M M Y Y

PRINT
NAME ON CARD _____

SIGNATURE _____

Ivory Education Institute
520 S. Sepulveda Blvd., Suite 204
Los Angeles, CA 90049
EM: hrmg@mac.com
Tel: (310) 476 6374
www.ivoryeducationinstitute.org