

# PCI CENTRAL REGION 2010 FALL EVENT

September 28-29, 2010, Columbus, Ohio

Please return by fax to 937-833-3700 by August 27, 2010

Hotel Information: **Crowne Plaza Hotel** - Phone: 800-338-4462  
33 East Nationwide Blvd., Columbus, OH 43215

Room Block: "PCI Central Region" - **\$109.00 plus tax**  
**The hotel will only hold our block of rooms until August 27, 2010**

## Tuesday, September 28<sup>th</sup> Nationwide Arena

<input type="checkbox"/> 6:00 p.m. - 7:00 p.m.	<b>Reception</b>	
7:00 p.m.	<b>Dinner</b>	
7:00 p.m. - 9:30 p.m.	<b>Hockey Game</b> .....	@ \$175 = \$ _____

(Includes reception, dinner, and breakfast and lunch at Membership Meeting on Wednesday)

## Wednesday, September 29<sup>th</sup> at the Columbus Country Club

<input type="checkbox"/> 8:00 a.m. Breakfast ....	<b>8:30 a.m. MEMBERSHIP MEETING</b> .....	11:30 a.m. Lunch	
<input type="checkbox"/> If only attending on Wednesday .....			@ \$75 = \$ _____

## Wednesday, September 29<sup>th</sup> at the Columbus Country Club

<input type="checkbox"/> 12:00 p.m.	<b>GOLF OUTING</b> – Shotgun Start.....	@ \$125 = \$ _____
<input type="checkbox"/> I will donate a prize for the golf outing.	Type of prize _____	
<input type="checkbox"/> I will attend the reception after golf		

### My company would like to be a Corporate Sponsor for this event:

- GOLD CORPORATE SPONSOR.....AMOUNT \$500 \$ \_\_\_\_\_
- SILVER CORPORATE SPONSOR.....AMOUNT \$300 \$ \_\_\_\_\_
- BRONZE CORPORATE SPONSOR.....AMOUNT \$100 \$ \_\_\_\_\_

**FAX this form to 937-833-3700 with credit card payment .....Total Amount = \$ \_\_\_\_\_**

- VISA                       MASTERCARD

Card # \_\_\_\_\_ Exp. \_\_\_\_\_ Signature \_\_\_\_\_

**Please Note if paying by credit card:** After the event is concluded credit card charges are processed through PCI in Chicago. Your charges will appear from PCI on your credit card statement. Thank you.

Or make checks payable to PCI Central Region – Complete this form and mail with payment to:  
**PCI Central Region, 9626 Upper Lewisburg Salem Road, Brookville, OH 45309**

Name \_\_\_\_\_ Company \_\_\_\_\_

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

Golf:  Yes     No                      Average 18-hole score \_\_\_\_\_

**List additional participants on a separate page**  
**Please return by fax to 937-833-3700 by August 27, 2010**  
If you have any questions, call Phil Wiedemann at Office: (937) 833-3900 Cell: (937) 371-5523  
**WE APPRECIATE YOUR PARTICIPATION AS A MEMBER OF THE PCI CENTRAL REGION. THANK YOU!**