

MISSOURI ASSOCIATION OF SCHOOL BUSINESS OFFICIALS
60th SPRING CONFERENCE BUSINESS
ASSOCIATE INFORMATION SHEET
APRIL 24-27, 2012

Please read this information before completing the attached forms

The 2012 Annual MoASBO Spring Conference is scheduled for April 24-27, and we are looking forward to your participation. The conference will again be held at The Resort at Port Arrowhead, Lake Ozark, MO. We believe this year's event will be as successful as in previous years, and we encourage you to participate in as many functions as possible.

In visiting with my counterparts from other states who have a comparable membership size, MoASBO provides absolutely the best "bang for your marketing buck". We have been able to keep the cost to our associate members low due to your willingness to sponsor the various activities that we have during the conference. I trust your continued participation will enable us to keep our costs competitive for you.

Tuesday should prove to be a bigger attendance day. On Tuesday April 24th we will have a golf tournament with MUSIC. That evening we will follow up the tournament with a BBQ and prize presentations at the Resort. We will also have a separate kick off celebration for the conference and will encourage non-golfers to participate.

Wednesday evening we will have our annual conference mixer with 5-7 p.m. poolside. We are hopeful that you will participate in this event and if you have a hospitality room that you will be closed from 5:30 to 7:00 p.m. in order that you can join in the festivities. We request that if you plan on taking people to dinner Wednesday night would be the best night. We will have a band entertaining poolside from 6:00 to 8:30 p.m. on Thursday evening.. Remember your participation in the Conference Mixer will give you another opportunity to meet and socialize with others attending the conference.

This package contains several forms that you will need to review and complete. **All forms, unless noted otherwise are due not later than March 9. For your convenience, there is one form where you can combine all your payments or you can pay individually on each form.**

1. BUSINESS ASSOCIATE REGISTRATION FORMS:

All company representatives must be registered for the conference either as a **Business Associate** or as an **Additional Company Representative**.

Business Associates are members of MoASBO and can participate in all conference activities. In addition, associate members receive the bi-monthly publication, MoASBO Journal, the annual MoASBO Directory, have access to the MoASBO webpage, have the opportunity to present at MoASBO conferences, publish articles in MoASBO publications, and will receive a copy of the Spring Conference Program Guide.

Additional company representatives can participate in conference activities, to include conference meals and hospitality room activities. These participants will not receive conference publications.

Conference registration forms should be mailed with payment to the address shown at the bottom of the form. Again, this form is not for hospitality rooms. Associate members are encouraged to make sleeping room reservations at the motels listed on the form. In order to allow as many active member conference attendees as possible to stay at the resort, **Please do not book sleeping rooms at the Resort at Port Arrowhead.**

2. HOSPITALITY ROOMS RESERVATION FORM:

All Associate Members who had a hospitality room during the 2011 Conference and wish to maintain that room assignment for the 2011 Conference must forward to MoASBO the Hospitality Room form and payment for the nights desired by **Friday, March 9, 2012**. New room requests will be assigned based on availability following March 9th. If you did not have a hospitality room during the 2011 Conference and would like to reserve a room for 2012, complete all forms as requested, attach payment, and forward to the MoASBO office. If there isn't an opening, you will receive a full refund for the room.

If you have a hospitality room, the Resort requests that all beverages that you serve be in cans. They have concerns in regard to the potential for broken glass in and around the pool area when conference attendees take bottles out of your room.

3. OFFICIAL CONFERENCE GUIDE ADVERTISEMENT FORM:

This form also contains the costs associated with various sizes of ads that will be in our official Spring Conference Program Guide. Please complete this form and return it to me not later than March 9th.

List of Attendees: MoASBO will provide a list of conference attendees for a fee of \$30. This list will contain only Active Members who have registered by **April 6th** in Excel format. The list will provide information that will allow you to produce a mailing list. You will receive the list by e-mail not later than April 8th. **Be sure to provide an accurate e-mail address, and return with payment.** If you are interested in receiving this data return your information to me by March 9th.

4. CONFERENCE ACTIVITIES SPONSORSHIPS

During our Spring Conference associate members assist MoASBO in sponsoring many of our conference activities. Sponsorships are available for the **Tuesday night kickoff celebration, Golf awards BBQ, Wednesday night mixer, band on Thursday night, keynote speaker, tote bags, meals, and breaks.** If your company would like to sponsor or co-sponsor an event or purchase a conference item to advertise your company, indicate the activity or product you want to sponsor and return the form to me.

Recognition of your sponsorship will be provided at the event, on the item, and in the Conference Guide.

5. GOLF TOURNAMENT SPONSORSHIP FORM

As I said at the beginning of this letter, this year MoASBO and MUSIC have joined together to have a MoASBO/MUSIC golf tournament. Profits from the tournament go to sponsor the scholarship funds for both organizations.

This form is for you to help sponsor the event and to register you and or a team(s) for the tournament. Payment for participation in the golf tournament and sponsorship of tournament activities must be made separate from other conference activities. See the Golf Tournament information form for payment instructions.

If you have questions about any of the forms or about any aspect of the conference please contact me. Our business associates always make our conference a huge success and I thank you for your generosity in the past as well as for this conference. You provide a great service to our organization and our membership. Best wishes and I will look forward to seeing you at the conference.

Respectfully,

Tom Momphard

Tom Momphard
Executive Director

Enclosures:

60th MoASBO ANNUAL CONFERENCE
*****BUSINESS ASSOCIATES*****
, INVOICE & REGISTRATION FORM
April 24-27, 2012
The Resort at Port Arrowhead, Lake Ozark, Missouri

REGISTRATION: All Business Associates who attend the conference must register. Complete all appropriate lines as requested. This information will be used for conference name badges and to update the association's database. This form is not for hospitality rooms. That information is on an accompanying form.

This form is to serve as the organization's **INVOICE** for this event. Provide check or credit card information for payment. **Your registration is not complete until payment is received.**

SHUTTLE SERVICE will be available to and from the motels and the conference headquarters. Check the conference program for pick-up locations. The service will begin at 6:30 a.m. each day and will run continuously through late evening.

Membership: Dues for 2012-13 may be paid at this time. Membership renewal dates are July 1 to June 30. To simplify the process MoASBO is encouraging you to renew now. It will save processing time and the writing of an additional check in the near future.

Sleeping room reservations are your responsibility. We request that you do not book sleeping rooms at the Resort at Port Arrowhead to allow conference participants to have access to these rooms. Room blocks have been reserved at the following locations: The Baymont Hotel, 866-365-2700; Country Club Hotel & Spa, 800-964-6698; and Quail's Nest, 800-700-1006; however there are several other motels in close proximity to the conference headquarters.

Refund Policy for Conference Registration:

A full refund will be made, less a \$15 service charge, if cancellation is made prior to April 15. After April 15 no refunds will be made.

MoASBO Business Associate Registration Form
(Complete this form for each Business Associate Registering for the Conference)

Name: _____ Company Name _____
 Position: _____ Type of Business: _____
 Street Address: _____ City/State/Zip _____
 Telephone: _____ Fax: _____ E-mail Address: _____
 First name to appear on badge: _____

Registration Total (Associates) Before April 1 --- \$195.00 _____ After April 1 ---- \$220.00 _____

MoASBO Business Associate Membership Dues for 2012-2013 (\$75.00) _____

Total Remitted for Conference Registration and Membership Dues \$ _____

Payment Options: Visa Master Card Check Enclosed Check No. _____

Card Holder's Name: _____

Account Number: _____ Expiration: _____

Authorized Total Amount: _____ Date: _____ Security Code _____

Signature: _____

Fax and mailing address:

Tom Momphard,
 Executive Director MoASBO
 3550 Amazonas Drive, Jefferson City, MO 65109
 Fax 573-556-6270
 Email: tmomphard@moasbo.org

<i>Office Use Only:</i>	
<i>Date Receive</i>	_____
<i>Amt Receive</i>	_____

Additional Company Representatives attending the Conference

All Company representatives must register for the conference, either as a Business Associate member of MoASBO or as an additional company representative. Additional company representatives will receive a name tag and can attend the conference activities but will not receive the conference magazine or the benefits that come with being a MoASBO Business Associate Member. Registration for each company representative is \$70.00. Complete the information for additional company reps who will be attending the conference.

Company Name _____

Contact Person _____ Phone number _____ email _____

Additional Company Representatives (Please Print)

Last Name First Name First name as it is to appear on name tag

Last Name First Name First name as it is to appear on name tag

Last Name First Name First name as it is to appear on name tag

Last Name First Name First name as it is to appear on name tag

Last Name First Name First name as it is to appear on name tag

Last Name First Name First name as it is to appear on name tag

Last Name First Name First name as it is to appear on name tag

Total Remitted for additional company representatives: \$ _____

Payment Options: Visa Master Card Check Enclosed Check No. _____

Card Holder's Name: _____

Account Number: _____ Expiration: _____

Authorized Total Amount: _____ Date: _____ Security Code _____

Signature: _____

Fax and mailing address:

Tom Momphard, Executive Director
MoASBO
3550 Amazonas Drive, Jefferson City, MO 65109
Fax 573-556-6270
Email: tmomphard@moasbo.org



HOSPITALITY ROOM RESERVATION FORM

The Resort at Port Arrowhead

MoASBO SPRING CONFERENCE: APRIL 24-27, 2012

Hospitality rooms are optional for our Business Associates and are limited in number (see information sheet). Returning business associates will be given first opportunity to retain the same hospitality room that was used for the 2011 Conference. Rooms not used by returning associates will be assigned based on the date that the reservation form and payment is received and the number of nights requested.

Remember that the golf tournament on Tuesday will attract a larger than normal crowd for Tuesday night.

THIS FORM AND FULL PAYMENT MUST BE RETURNED VIA MAIL, FAX, OR EMAIL BY MARCH 9, 2011, TO GUARANTEE YOUR ROOM.

BUSINESS ASSOCIATE INFORMATION

COMPANY NAME: _____ Contact Person: _____

Mailing Address: _____

Business Phone: _____ Business Fax _____ E-mail: _____

ROOM RESERVATION

Prices are for one room. If more than one room is requested (ie, suites), the cost is \$102.00 per night per additional room.

Tuesday, April 24 through Thursday, April 27 (3 nights) -----\$365.00 _____

OR

Wednesday, April 25, and Thursday, April 27 (2 nights) ----- \$253.00 _____

If you are a returning business associate who has had a hospitality room in the past and would like to change rooms, please indicate your room preference.

2011 Hospitality Room _____

Room Requested for 2012 _____

ROOM ARRANGEMENTS

To expedite the opening your Hospitality Room, please provide the following information which will be forwarded on the hotel.

Beds will need to be removed from the room: Yes ___ No ___ (A fee of \$50 will be charged for this service and charted at the time of checkout)

I will need the following additional tables for the room: 6' ___ 8' x 18" ___ 8' x 30" w/ skirt

I will need the following additional chairs for the room: ___

Important Note: All activities and displays pertaining to your company representation must be kept within your hospitality room. NO displays or machines should be used that require high amp power draws unless you make arrangements through The Resort in advance to provide alternate power. (This includes margarita and popcorn machines.) **The Resort requests that you do not use glass containers for beverages to include beer and soda due to the possibility of glass ending up around the deck area or in the swimming pool.**

The catering department has an excellent selection of food and beverage items and would be happy to provide you a menu and assistance with all your needs. You may call 1-800-532-3575 to talk to one of the catering professionals. (Payment for all additional services will be payable to The Resort at the time of checkout.)

Payment Options: Visa Master Card Check Enclosed Check No. _____

Card Holder's Name: _____

Account Number: _____ Expiration: _____

Authorized Total Amount: _____ Date: _____ Security Code _____

Signature: _____

Fax and mailing address:

Tom Momphard,
Executive Director MoASBO
3550 Amazonas Drive, Jefferson City, MO 65109 Fax: 573-556-6270

Office Use Only:

Date Receive _____

Amt Receive _____

Spring Conference Program Advertisement Order Form

The Missouri Association of School Business Officials is again providing our Business Associate members the opportunity to advertise in the Spring Conference Program for 2012. As you read through this letter, consider the following: participation in the MoASBO Spring Conference has grown to over 800 school district members that represent a major portion of Missouri districts. I believe if you choose to advertise, it will be of benefit to your company.

The program will be printed in an 8 ½” by 11” format, black and white with a colored front and back cover. Ad space will be available in 1/3 page, 1/2 page, horizontal format only, and full page. Ad space in the program will be limited to six pages. Orders received first will receive priority consideration until the space is filled. Orders must be received by **March 9, 2012**.

If you are interested in purchasing ad space, please complete the information below and fax or mail to the address provided. Following receipt of this form, you will be notified that your ad has been accepted. You can then forward the ad electronically in a pdf format to me at tmomphard@moasbo.org. Payment can be made with check or credit card with this order. If your ad is not accepted because of space constraints and you sent payment with the order, it will be returned.

Company Name: _____

Contact Person: _____

Business Address: _____

City / State / Zip: _____ **E-Mail Address:** _____

To purchase ad space in the Spring Conference Program, please review and complete the following:

Program Advertisement:

1/3 Page (3 ½ high x 7 1/2)	\$185.00 _____
1/2 Page (5 high x 7 ½) or (3 ½ x 10)	\$235.00 _____
Full Page (10 high x 7 ½)	\$450.00 _____
Total	\$ _____

Payment Options: Visa Master Card Check Enclosed Check No. _____

Card Holder's Name: _____

Account Number: _____ Expiration: _____

Authorized Total Amount: _____ Date: _____ Security Code _____

Signature: _____

Fax and mailing address:

Tom Momphard, Executive Director
MoASBO
3550 Amazonas Drive, Jefferson City, MO 65109
Fax 573-556-6270
Email: tmomphard@moasbo.org



Conference Sponsorship Order Form

MoASBO is making a request to our Business Associate Members for additional assistance and participation in this year's conference. Below we have listed several items and events for which you can feature your company. Mark the item of interest and return this form by March 9th.

- Band for Thursday night entertainment—cost \$500.**
Sponsored Amount \$ _____.

 - Kickoff Celebration for Tuesday night—cost \$2,000..**
Sponsored Amount \$ _____.

 - Band for Thursday night entertainment—cost \$500.**
Sponsored Amount \$ _____.

 - Keynote speaker—Any Amount.**
Sponsored Amount \$ _____.

 - Tote Bag** displaying your company name or logo for each participant you provide or MoASBO will order with your logo at approximately \$2.50 per bag.
Sponsored Amount \$ _____.

 - Refreshments** for a break between workshop sessions. Approximately \$1,500 per day.
Sponsored Amount \$ _____.

 - Tuesday Evening BBQ Golf Awards and and Social** \$12.50 per attendee. Anticipate 250 attendees.
Sponsored Amount \$ _____.

 - Wednesday Lunch** \$15 per attendee. Anticipate 450 attendees.
Sponsored Amount \$ _____.

 - Wednesday night mixer** – approximately \$7,000.00
Sponsored Amount \$ _____.

 - Thursday Breakfast** \$12 per attendee. Anticipate 325 attendees
Sponsored Amount \$ _____.

 - Thursday Lunch** \$15 per attendee. Anticipate 500 attendees.
Sponsored Amount \$ _____.

 - Friday Breakfast** \$12.500 per attendee. Anticipate 180 attendees.
Sponsored Amount \$ _____.

 - List of Active-Member Attendees as of April 4. List will be in Excel format and the cost is \$30.00.

 - Conference give-a-ways for tote bags. I must receive your give-a-way items not later than April 4.
- TOTAL AMOUNT FOR EVENTS SPONSORED \$ _____**
-

Company _____
Name: Contact _____
Person: _____
Business _____
Address: _____
City / State / Zip: _____ **E-Mail Address:** _____

Payment Options: Visa Master Card Check Enclosed Check No. _____
Card Holder's Name: _____
Account Number: _____ Expiration: _____
Authorized Total Amount: _____ Date: _____ Security Code _____
Signature: _____

Fax and mailing address:
Tom Mompard,
Executive Director MoASBO
3550 Amazonas Drive
Fax 573-556-6270 email mleech@moasbo.org

<p><i>Office Use Only:</i> Date Receive _____ Amt Receive _____</p>

COMBINED PAYMENT FORM

Payments for Registration, Hospitality Room Reservation, Advertising in the Conference Program Guide, and Attendees' list, and Sponsorship Opportunities (depending on the policies of your company) may be combined and made payable to MoASBO. If you use this combined form, make sure you return the individual forms associated with each activity in which you wish to participate.

Total conference Registration (Business Associates & Add Reps)	\$ _____
Total 2012-2013 – Membership Fee	\$ _____
Total Hospitality Room	\$ _____
Total for Advertising in the Spring Conference Program Guide	\$ _____
Total for List of Attendees registered by April 8th (\$30.00 per list)	\$ _____
Total from Conference Sponsorship Order Form	\$ _____
GRAND TOTAL	\$ _____

Company Name: _____

Contact Person: _____

Business Address: _____

City / State / Zip: _____ E-Mail Address: _____

Payment Options: Visa Master Card Check Enclosed Check No. _____

Card Holder's Name: _____

Account Number: _____ Expiration: _____ Security Code _____

Authorized Total Amount: _____ Date: _____

Signature: _____

If using this combined form for your combined payment, be sure to return all of the individual forms for which you are making a payment.

Fax and mailing address:

Tom Momphard,
Executive Director MoASBO
3550 Amazonas Drive
Jefferson City, MO 65109
Fax 573-556-6270
Email tmomphard@moasbo.org

Office Use Only:

Date Receive _____
Amt Receive _____

MoASBO-MUSIC Scholarship Golf Tournament

The Lodge of the 4 Seasons Cove and Ridge Golf Courses

MoASBO and MUSIC have combined their golf tournaments and will have a single tournament on Tuesday, April 24, 2012 prior to the MoASBO Spring Conference. All revenue from this event will be split evenly between the two organizations and will go to sponsor their respective student scholarship funds.

As a business associate we look forward to your participation in this event and trust that you will find it to be an excellent opportunity to showcase your company as well as support these two worthy endeavors.

Registration Information

Complete the registration form for as many team members and teams as you would like to enter. Be sure to include all company reps that you want to play on each team. If you would like to field a team but are uncertain as to whom you want on the team, you can pay for the team and add the team members at any time prior to April 15.

If you do not register a team we will attempt to place you with active MoASBO/MUSIC members however we cannot guarantee all of your team members will be active members of our organizations.

There will be two flights with cash payment of \$75.00 for 1st place in both flights, \$50.00 for 2d place in and \$25.00 for 3d place.

Mulligans can be purchased at your assigned course for \$20.00 per team.

Sponsorships

In addition to your registration for the tournament, there are also opportunities for additional sponsorships as well as door prize give-a-ways. **All associates who sponsor an activity or provide a door prize will be recognized at the awards BBQ and in the MoASBO Spring Conference Journal and in the MUSIC Matters Newsletter.** The following list the sponsorship opportunities. Please keep in mind that we will be playing two courses at the Lodge.

Hole Sponsors - \$200.00 per hole. Includes one registration fee, 2 drink coupons on the course, BBQ dinner, and a sign with your company's name on the tee box of the hole(s) sponsored.

Longest Putt 4 sponsorships 2 on front nine and 2 on back nine of each course. \$50.00 per hole.

Dinner Sponsorships. If you would like to help sponsor the BBQ and awards celebration following the tournament at the Resort at Port Arrowhead, the meal is \$12.50 per person. Please indicate how many meals you are willing to sponsor at this cost.

Door Prizes. If you would like to donate a door prize to be given away at the BBQ please indicate what your prize is and bring it to the BBQ. Do not take it to the course.

Total Payment for MoASBO/MUSIC Golf Tournament

Please return this page along with your registration form.

Company/Organization _____ Contact Person _____

1. Registration Total \$ _____ 2. Hole Sponsorship Total \$ _____ 3. Shortest Putt total \$ _____

4. Dinner Sponsor @ \$12.50 per meal \$ _____ 5. **Total for Registration and Sponsorships** \$ _____

Door Prize(s) Please list:

Make checks payable to MoASBO-MUSIC Scholarship Fund. We can only accept checks for this event. Refund only if courses are closed prior to start of tournament

Send registration and payment by Friday, April 13, 2012 to:
Tom Momphard, Executive Director
MoASBO
3550 Amazonas Drive, Jefferson City, MO 65109

MoASBO-MUSIC Scholarship Golf Tournament
The Lodge of the 4 Seasons Cove and Ridge Golf Courses
Tuesday, April 24, 2012 1:00 p.m. Shotgun Start
(Call course for directions – 573-365-8574)

FOUR PERSON SCRAMBLE

Each tournament participant must be a current member of MoASBO (Active, Educational, Emeritus, or Business Associate), MUSIC, or a Business Associate of MUSIC. This tournament is limited to 100 players per course so early registration is encouraged.

Proceeds from our first combined MoASBO-MUSIC golf tournament will sponsor the Scholarship Fund for these organizations. The tournament is a 4-man scramble with a cost of \$60 per player. The tournament will be held on Tuesday, April 24, 2012 at the Cove and Ridge Courses at the Lodge of 4 Seasons. Course assignments will be emailed to each team member following the close of registration on Friday, April 13. There will be no refunds for cancellations after this date.

Registration includes green fees, 2 drink tickets on the course, eligibility for cash flight awards, door prizes, skill contests, and a BBQ dinner at 6:30 p.m. after the tournament.

The BBQ dinner with an awards presentation and door prizes will be held at the Resort at Port Arrowhead. You must be present at the BBQ to win a door prize.

Company/Organization _____

Contact person and email address if not listed as a Player _____

Player Registration: \$60 Per Player
Check-in at each course the day of the tournament is from 10:00 to 12:00 noon

Player 1) _____ E-mail Address: _____

Player 2) _____ E-mail Address: _____

Player 3) _____ E-mail Address: _____

Player 4) _____ E-mail Address: _____

(Individuals and teams with fewer than four will be combined to make a complete team)

Payment must accompany this form to complete registration for the tournament

Make checks payable to MoASBO-MUSIC Scholarship Fund. We can only accept checks for this event. Refund only if courses are closed prior to start of tournament

Send registration and payment by Friday, April 13, 2012 to:

Tom Momphard,
Executive Director
MoASBO
3550 Amazonas Drive
Jefferson City, MO 65109