



## Name Badge Pre-Registration Form

Please return to the TRAO office by September 1, 2016

Forms returned after 9/1/16 will be printed at the event.

Fax: 513.791.7555 OR Email: [midwest@trao.org](mailto:midwest@trao.org)

Please print clearly.

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

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Attendees: \_\_\_\_\_

Attendees: \_\_\_\_\_

Attendees: \_\_\_\_\_

Attendees: \_\_\_\_\_

Attendees: \_\_\_\_\_

Attendees: \_\_\_\_\_

Attendees: \_\_\_\_\_

**Name Badges may be claimed in the front lobby of the Conference Center  
beginning Thursday afternoon.**