

GROUP REGISTRATION FORM



ADCP

The Art Directors Club of Philadelphia

P.O. Box 927
Conshohocken, PA 19428
membership@adcp.org
adcp.org

Congregate, Collaborate, and Inspire.

COMPANY INFORMATION

COMPANY NAME

TYPE OF BUSINESS

COMPANY ADDRESS

CONTACT PERSON

TITLE:

EMAIL ADDRESS

(You must provide at least 5 names to be eligible for the Group Registration rates.)

NAME

TITLE:

EMAIL ADDRESS

NAME

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TITLE:

EMAIL ADDRESS

To add more registrants, please copy this page.

Total # of Registrants: _____ x \$100.00 each = \$_____.

Please make your check payable to: **The Art Directors Club of Philadelphia**
Mail to: **ADCP, P.O. Box 927, Conshohocken, PA 19428**
Questions? Email membership@adcp.org