

*Making Transition History  
In Historic*

*Savannah*  
GEORGIA



*Welcome*

*To*

*DCDT and Savannah*

*2009*

*Division on Career Development  
and Transition*

*15<sup>th</sup> International Conference*

*October 29 - 31, 2009*



## **PARTNERSHIP OPPORTUNITIES FOR NON-PROFIT ORGANIZATIONS**

**The Division on Career Development and Transition  
has several exciting partnership opportunities available for your  
organization to support services to persons with disabilities  
as they transition into working environments,  
the community and/or postsecondary education.**

*The Westin  
Savannah Harbor  
One Resort Drive  
PO Box 427  
Savannah, GA 31421  
912-201-2000*

**DIVISION ON CAREER DEVELOPMENT AND TRANSITION  
2009 INTERNATIONAL CONFERENCE  
SAVANNAH, GEORGIA  
OCTOBER 29-31, 2009**

**NON-PROFIT PARTNERSHIP RSVP FORM**

**ORGANIZATION NAME:** \_\_\_\_\_

**ORGANIZATION ADDRESS:** \_\_\_\_\_  
\_\_\_\_\_

Yes, I would like to commit to the following Non-Profit Partnership

\_\_\_\_\_ One 6' x 8' exhibit booth with organization name listed in conference program

Includes one conference registration, including all sessions and meal functions - **\$550**

Yes, I would like to commit to the following a' la carte partnership(s)

\_\_\_\_\_ Advertisement in Conference Program:

\_\_\_\_\_ ¼ page - **\$250**

\_\_\_\_\_ ½ page - **\$500**

\_\_\_\_\_ Full page - **\$1,000**

\_\_\_\_\_ Conference Registration (*Registration must be made on line and will be available April 1, 2009*)

\_\_\_\_\_ Sponsor Conference Bag with Logo - **\$3,500** (*Only One Sponsor Needed – First Come, First Served*)

\_\_\_\_\_ Sponsorship of Family/Student Scholarship - **\$1,000**

Number of Scholarships: \_\_\_\_\_ at **\$1,000** each

**Total Amount Due: \$** \_\_\_\_\_

*\*Internet, electrical and utility services may be purchased directly from the Convention Center:  
1 International Drive, PO Box 248, Savannah, GA 31402-0248 – (912) 447-4710 – Fax (912) 447-4711*

Make all checks payable to DCDT (Federal Tax ID- **91-1220306**)  
Please return this form along with payment by **August 28, 2009**, to:

**Dr. Cindi Nixon  
4021 Peniel Rd  
Timmons ville, SC 29161**

- *All organization artwork, logos, and promotional materials cannot be guaranteed if submitted after July 31,, 2009*

Signature

Title

Date

Email

Phone