



**2009 Office Business Centers Industry Survey
Order Form**

Name: _____ Title: _____
 Email: _____
 Company: _____
 Address: _____
 City: _____ State: _____
 Country: _____ Zip: _____

Please choose one of the following:

<input type="checkbox"/> Member Participant	\$99*	<input type="checkbox"/> Non-Member Participant	\$149*
<input type="checkbox"/> Member Non-Participant	\$249*	<input type="checkbox"/> Non-Member Non-Participant	\$499*
<input type="checkbox"/> Student	\$99*		

**Plus applicable tax and shipping. All dollar amounts are in U.S. Dollars*

Payment Information

Check enclosed (payable to OBCAI) Check No. _____

Credit Card Payment Visa MasterCard

Card Number: _____ Exp. Date: _____ Security Code: _____
3 Digit

Name on Card: _____ Amt: _____

Signature: _____

Fax your order form to (949) 260-9021
 Or mail to:
 Office Business Center Association International
 2030 Main Street, Suite 1300
 Irvine, CA 92614