

ACN'S FINAL INTERNATIONAL TRAINING EVENT IN 2008

DECEMBER 5 – 7, 2008 • ANAHEIM CONVENTION CENTER • ANAHEIM, CA

Early Bird – \$109 – ends September 23
 Pre-Reg – \$119 – ends November 19
 On-site – \$139

Close the year out strong with the single most important thing you can do for your business – attend ACN's International Training Event in beautiful Anaheim, California. Take advantage of the critical training and motivational messages provided by ACN's Founders and other leaders, along with the opportunity to celebrate successes with your team and network with thousands of representatives from around the world.

NOW'S THE TIME, THIS IS THE PLACE, COMMIT TO ATTENDING THE ANAHEIM EVENT TODAY!

ACN[®] INTERNATIONAL TRAINING EVENT



4 WAYS TO REGISTER

1. REGISTER ONLINE:
www.acninc.com
 – MyACN for Representatives

2. FAX FORM:
 704-260-3652
 Canada: 514-390-2549
ATTN: Rep Entry (Be sure to check your registration status using MyACN for Representatives to ensure your registration has been confirmed.)

3. MAIL FORM:
 ACN World Headquarters
 1000 Progress Place
 Concord, NC 28025-2449

4. CALL REPRESENTATIVE SERVICES:
 704-260-3226 • M-F 9am - 3 am ET
 Canada: 514-390-8666 • M-F 9am - 9 pm ET

Name as it should appear on badge & photo ID (Individuals only - no partnership names)

| | | | |
|--|-----|--------------------|-----------------|
| Team ID#, S.S.#, Soc. Ins.#, or Fed. Tax ID# of cardholder | | Name of Upline RVP | |
| Address | | P.O. Box | |
| City | | State/Province | Zip/Postal Code |
| Phone | Fax | Email Address | |

PAYMENT INFORMATION

Check is enclosed; number _____
 Money order is enclosed; number _____
 Paying by: Visa / MasterCard / AMEX / Discover (please complete form below)

I, the undersigned, hereby authorize ACN to charge this credit card for the pre-registration amount. I acknowledge that I have legal authority to enter into this agreement. I have carefully read the terms and conditions and by signing this document, I agree to the content thereof.

| | |
|---|--|
| Visa, MasterCard, AMEX or Discover Number (Please double check number for accuracy) | Expiration Date |
| Name as it appears on credit card (please print) | Total amount being charged on this credit card |
| Signature | Team ID#, S.S.#, Soc. Ins.#, or Fed. Tax ID# of cardholder |

Please check here if you require a sign language interpreter.

- There are NO refunds, exchanges, cancellations or transfers.
- One form per person. (Members of a partnership MUST fax in a separate form for each individual attending. Name badges cannot be in a business name.)
- If credit card payment is selected, you MUST complete credit card information.
- Please do not include payment for other ACN products or services with the pre-registration fee.
- Faxed copies of checks are NOT acceptable forms of payment.