

**AMDA Philadelphia May 2 – 4, 2012  
Art Museum Development Association 40<sup>th</sup> Annual Conference**

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**Registration Form**  
**Kindly submit no later than April 2, 2012.**

**Membership and Conference Registration**

2012 – 2013 AMDA Membership\* **\$100**

**\*A Note to New Members:**

*Membership in AMDA is open to the most senior development executive whose primary function is the development of financial resources for his/her art museum. By submitting your membership request you are confirming that you hold that position at your institution. Thank you and welcome!*

**Yes, I will attend the 2012 AMDA Conference!** **\$900**

*The Conference registration fee is \$900. This fee includes all conference programs, tours and meals. If you wish to bring a guest to the dinner(s) on Wednesday, May 2, and/or Thursday, May 3<sup>rd</sup>, there is an additional charge of **\$125** per guest per dinner.*

**Additional fee for guest(s)** \_\_\_\_\_

**We ask that you pay for your AMDA Conference and/or Membership fee via check.**

**TOTAL AMOUNT ENCLOSED:** \_\_\_\_\_

**Payment Information**

**Checks should be made payable to the Philadelphia Museum of Art. Please include "AMDA Membership" on the memo line.**

Return this form\* with your payment to:

Kelly O'Brien  
Executive Director of Development  
Philadelphia Museum of Art  
P.O. Box 7646  
Philadelphia, PA 19101-7646

For inquires:  
215-684-7352  
[registration@amdaconference.org](mailto:registration@amdaconference.org)

\*You may email completed form to [registration@amdaconference.org](mailto:registration@amdaconference.org), and mail check to PMA.

Please complete the following biographical information, as you would like it to appear on the  
AMDA 2012 Membership Roster:

**Biographical Information**

Name \_\_\_\_\_

Organization \_\_\_\_\_

Title \_\_\_\_\_

Address \_\_\_\_\_

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

Email \_\_\_\_\_

Work Phone \_\_\_\_\_

Conference Name Badge \_\_\_\_\_

**Please include my guest(s) at the Wednesday, May 2, opening dinner at the Philadelphia  
Museum of Art.**

Guest Name: \_\_\_\_\_

**Please include my guest(s) at the Thursday, May 3, dinner at the Pennsylvania Academy  
of the Fine Arts.**

Guest Name: \_\_\_\_\_

**Other Information:**

Special Diet or Requests: \_\_\_\_\_

Other Special Needs: \_\_\_\_\_

I will arrive Tuesday night and will attend the New Members & First-time Attendees  
Welcome Reception.

I will attend a Wednesday morning Roundtable Discussion.

Please indicate which Roundtable Discussion \_\_\_\_\_

I can't wait to start my day with:

Yoga (Wed) \_\_\_\_\_ A Run up the Rocky Steps (Thurs) \_\_\_\_\_ Yoga (Fri) \_\_\_\_\_