



National Kidney Foundation™ of Illinois

2009 Lifetime of Service Award Dinner—Fredric Coe, MD

Name _____ Degree _____

Institutional Affiliation _____

Address _____ City _____ State _____ Zip _____

Phone _____ Fax _____ Email _____

Yes! I would like to attend Dr. Coe’s Lifetime of Service Award Dinner

_____ Physicians and guests = \$75 per person

_____ RN, SW, RD, Fellows, Technicians = \$50 per person

_____ I would like to honor Dr. Coe with a gift to the NKFI of \$_____

I would like to join the NKFI 2010 Scientific Advisory Board. Members are entitled to one complimentary ticket to the spring **Controversies in Nephrology** dinner lecture = \$100

Enclosed is my check to: National Kidney Foundation of Illinois, Inc. in the amount of:

\$_____ I am paying for the following individuals: _____

I would like to sponsor an ad in the program book = \$400 full page; \$250 half page. A form will be emailed to you to complete.

Please mail to: National Kidney Foundation of Illinois
215 West Illinois, Suite 1C | Chicago, IL 60654

I will pay by credit card and fax this form to: 312.321.1505

Visa Mastercard Discover AmericanExpress

Total charge on credit card \$_____

Card Number _____ Exp. Date _____

Signature of Cardholder _____

Please RSVP by Tuesday, November 24, 2009. Valet Parking is available.
For more information, please contact Diane Hollingsworth at 312.321.1500 or
via email to dhollingsworth@nkfi.org