

# Build Your Network: Attend an NASFT Share Group

The specialty food industry is your passion, but there are challenges you must meet to succeed. To help you develop a network of peers, the NASFT will be continuing its successful **Share Group** program in the coming months.

## Share Group

Meeting of individuals with common background, structured and moderated by industry expert and centered around particular theme. Intended to allow participants to openly share issues and exchange ideas in a safe setting while building support network and community.

**San Francisco**  
**Share Group at**  
**the Winter Fancy Food Show**  
 All Members Welcome!  
 January 13

**Boston**  
**Local Share Group**  
 January 23

**New York**  
**Local Share Group**  
 January 24

**Virginia**  
**Local Share Group**  
 January 26

**Los Angeles**  
**Local Share Group**  
 February 6

**Chicago**  
**Local Share Group**  
 March 13

**All Share Groups are from 4–6 p.m.**

*"I find the Share Groups to be effective in helping me understand the business. I got the scoop on distributors insight on how to get access to a particular retailer, and a few suggestions for label designers."*

**Jina Kim, Rick's Picks**

Please check which Share Group(s) you would like to attend:	Date	Registration deadline	Number attending	Price	Subtotal
<input type="checkbox"/> <b>SAN FRANCISCO</b>	January 13	January 10		<b>\$20</b>	
<input type="checkbox"/> <b>BOSTON</b>	January 23	January 20		<b>\$20</b>	
<input type="checkbox"/> <b>NEW YORK</b>	January 24	January 20		<b>\$20</b>	
<input type="checkbox"/> <b>VIRGINIA</b>	January 26	January 20		<b>\$20</b>	
<input type="checkbox"/> <b>LOS ANGELES</b>	February 6	February 2		<b>\$20</b>	
<input type="checkbox"/> <b>CHICAGO</b>	March 13	March 8		<b>\$20</b>	
			<i>Total</i>		

## CONTACT INFORMATION

1. Name: \_\_\_\_\_ Email Address \_\_\_\_\_

2. Name: \_\_\_\_\_ Email Address \_\_\_\_\_

3. Name: \_\_\_\_\_ Email Address \_\_\_\_\_

Company \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Email \_\_\_\_\_

## PAYMENT

**CHECK ENCLOSED FOR \$ \_\_\_\_\_**

**CREDIT CARD INFORMATION:**  AMEX  MASTERCARD  VISA

ALL PAYMENTS TO:

TOTAL AMOUNT CHARGED: \$ \_\_\_\_\_

NASFT  
 136 Madison Avenue  
 12th Floor  
 NY NY 10016  
 Attn: Erika Sipos

CARD NUMBER \_\_\_\_\_ EXP. DATE \_\_\_\_\_ / \_\_\_\_\_

CARDHOLDER NAME \_\_\_\_\_ ZIP CODE \_\_\_\_\_

AUTHORIZED SIGNATURE \_\_\_\_\_

**Space is limited and sessions are first-come first-serve. To reserve your spot, fax your registration form to Erika Sipos at 646.878.0240 before the date indicated for the Share Group of your choice.**

Detailed information (including location) to follow in confirmation letter after you register