

12th Annual Nonprofit Management Conference

Thursday, May 18, 2017 8:00 a.m. – 3:10 p.m.

Walsh College – 3838 Livernois, Troy, MI 48083



Includes breakout sessions, continental breakfast, lunch, and on-site nonprofit expo

Presented by



Venue Sponsor



Human Resources/Volunteers/Staff:

- *Diversity in Your Nonprofit? Pro Tips and Pitfalls*

Leadership/Board Development:

- *Get Your Board to Help With Fundraising!*

Strategic Planning:

- *Develop a Strategic Plan That Results in Operational Action*

Marketing:

- *Obtaining Event Sponsorship*
- *The Three E's of Event Planning: Engage, Entertain & Extract*
- *Making Headlines: Secrets to Successful Interviews with Journalists*

Technology:

- *The Hub of the Wheel—Why Everything Revolves Around Your Website*

Fund Development/Donor Relations:

- *New Fundraising Trends to Compliment Traditional Methods*
- *Your Online Fundraising Toolkit: Converting Prospects to Donors*
- *Find Out How to Dramatically Improve Individual Donor Fundraising*

Governance/Operations:

- *Will Donated or Leased Space Work for Your Nonprofit?*
- *Corporate Governance Made Easy*
- *Can I Do That? Should I Do That? Do I Have To Do That? Legal Issues for Nonprofits*

Finance/Accounting:

- *Endowments—Bolster the Financial Stability of Your Organization for Today and Tomorrow*
- *CRA Dollars... What Are They and How Can I Get Some?*

For a full description of breakout sessions and speakers, go to www.troychamber.com/non-profit-network

Registration:

FAX to the Troy Chamber (248-641-0545). E-mail address must be provided for confirmation. Payment due in full by May 10, 2017

Attendee Name(s): _____

Organization Name: _____

Address: _____ City: _____ ZIP: _____

Phone: (____) _____ E-mail: _____

PAYMENT: (Checks payable to: Troy Chamber of Commerce, 2125 Butterfield Dr., Ste. 100N, Troy, MI 48084)

COST: \$60 - Troy Chamber members / \$110 - Non-members (Groups of 2 or more from same non-member organization save \$10 per person)

_____ Attendees @ \$_____ each = \$_____

Please Invoice Credit Card # _____ Exp. Date ____/____/____

Cardholder Signature _____ Billing Zip Code _____