



**AIRPORT AREA  
CHAMBER OF COMMERCE**

*The Airport Chamber wants to help you jump start 2010 with a special Seminar!*



**NetWeavers International**  
"Good Things Happen to those People ... Who Make Good Things Happen"



### **NetWeaving Seminar**

**"Good Things Happen to those People... Who Make Good Things Happen"**

Presented by Robert Littell,  
Author, speaker and Chief NetWeaver

February 16, 2010

11:00AM: Registration & Netweaving

11:30AM: Lunch/Business/Program

Georgia International Convention Center

*NetWeaving* is a new win-win form of networking based upon the Golden Rule and considered by a number of leadership management, coaching, and training experts to be the most exciting new concept to come along in the past decade. Learn about this concept from the creator of the concept and co-author of the book, "Power NetWeaving" and "The Heart and Art of NetWeaving"- Bob Littell, Principal, Littell Consulting Services. Bob also co-chairs the steering committee of the Pay It Forward Foundation in California, created by Catherine Ryan Hyde, the author of the book on which the popular Warner Bros. movie *Pay It Forward* was based.

During his presentation you can expect to learn:

- How to become more referable and recommendable
- Step-by-Step program to build trusted relationships
- How to incorporate the skill sets of NetWeaving into your daily life and your business
- How the process of "relationship-building" works – from the moment you first meet someone right through obtaining and maintaining TRUST. . . and why NetWeaving helps facilitate the process.

**Take the NetWeavers Aptitude Assessment test at <http://www.netweaving.com>.**

*Bob donates 100% of the proceeds from his book to charity.*

**Cost: Lunch: \$25 for Members & \$30 for Non-members**

*For reservations, please fill out the registration form below & RSVP by Friday, February 11, 2010, via: email: [info@airportchamber.com](mailto:info@airportchamber.com); phone: 404-209-0910; or fax: 404-389-0271. (No-shows will be billed.)*

Name \_\_\_\_\_ Title \_\_\_\_\_  
 Company \_\_\_\_\_  
 Address \_\_\_\_\_ Suite \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Phone \_\_\_\_\_ Fax \_\_\_\_\_ E-mail \_\_\_\_\_  
 Indicate Payment Method:  Check  Visa  MasterCard  Will Pay at Door  Please Invoice  
 Credit Card # \_\_\_\_\_ Exp. Date \_\_\_\_\_ ID# \_\_\_\_\_  
 Signature \_\_\_\_\_