REGISTRATION FORM

45th ANNUAL CONFERENCE AND TRADE SHOW • TAMPA , FLORIDA • MAY 13 - 16 2012

Name (last, first) _____ Certification(s)_____

Name to be printed on badge _____

Title _____ Agency/Organization _____

Guest Name _____

Mailing Address _____

Phone (_____) _____ Fax (_____) _____

E-mail Address _____

☐ Any special dietary needs or special accommodations you may require? _____

_____

Is this your first FAPPO Conference? ☐ Yes ☐ No

FULL REGISTRATION: Conference Program, Trade Show, Special Event and Banquet
*Cancellation Requests for Refund shall be received by FAPPO no later than **APRIL 13, 2012**. NO REFUNDS WILL BE ISSUED AFTER THIS DATE.

	Early Bird Registration Fee *Prior to 3/23/2012	Fee if Received after 3/23/2012	
☐ FAPPO Member	$275.00	$300.00	$ _____
☐ FAPPO Bucks (Deduct)			$ _____
☐ Non-member fee	$475.00	$500.00	$ _____

ONE DAY REGISTRATIONS: Includes any meals and events scheduled for that day.

FAPPO Members	☐ Sunday ($75)	☐ Monday (Free)	☐ Tuesday ($175)	☐ Wednesday ($75)
Non-Members	☐ Sunday ($150)	☐ Monday (Free)	☐ Tuesday ($200)	☐ Wednesday ($150)

TOTAL:..... $ _____

PAYMENT INFORMATION
*Payment shall be **POSTMARKED** (if mailed) or **RECEIVED** (if credit card) prior to the **EARLY BIRD REGISTRATION DATE** to receive the discounted rate. **FAPPO FEIN: 59-2615678**

PAYMENT BY CHECK:
☐ Enclosed is my check or money order, payable to FAPPO, Inc. in the amount of $_____
CHECK PAYABLE TO: FAPPO, Inc.
MAIL TO: FAPPO, 8875 Hidden River Parkway, Suite 330 #3059, Tampa, FL 33637

PAYMENT BY CREDIT CARD:
Charge my ☐ VISA ☐ MASTERCARD ☐ AMERICAN EXPRESS
Amount Authorized: _____ Card Number: _____ Exp. Date: _____
Name on Card: _____ Signature: _____

EMAIL COMPLETED FORM TO
execdirector@fappo.org or FAX: 813.333.1767