



# 22<sup>nd</sup> ANNUAL CONFERENCE

Sunday and Monday, April 11 and 12, 2010

InterContinental Harbor Court Baltimore  
Baltimore, MD

## Registration Form

Full name: \_\_\_\_\_ Title: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

Non-attending guest's full name: \_\_\_\_\_

Registration includes: All conferences, continental breakfasts, refreshment breaks, lunches, and reception. Guest fee for breakfasts, lunches and reception – see below.

### Two Day Registration

	Registration fees	Payment
<input type="checkbox"/> AFROC member	\$475	\$ _____
<input type="checkbox"/> Additional AFROC members*	\$450	\$ _____
<input type="checkbox"/> Non-Member	\$550	\$ _____
<input type="checkbox"/> Guest	\$175	\$ _____

### One Day Registration

<input type="checkbox"/> AFROC member	\$300	\$ _____
<input type="checkbox"/> Additional AFROC members*	\$275	\$ _____
<input type="checkbox"/> Non-Member	\$325	\$ _____

*Any member organization paying a \$475 registration fee will be granted a \$50 reduction in registration fees per additional attendee. Please return forms for multiple attendees together.*

**Payment Information**

Total \_\_\_\_\_

Enclosed is check # \_\_\_\_\_ (Payable to AFROC)

VISA       MasterCard    Card #: \_\_\_\_\_ Exp date: \_\_\_\_\_

Name as it appears on card: \_\_\_\_\_

Authorized signature: \_\_\_\_\_