



# FPHRA 81st Annual

## **Pre-Conference & Conference Registration Form**

July 29 - August 2, 2017

### **Wyndham Grand Orlando Resort Bonnet Creek**

14651 Chelonia Parkway Orlando, Florida 32821



Hotel Reservations 1-407-390-2300 Mention: FPHRA Conference

Please print clea	rly in block letters or type:		Mention: FPHRA Conferer	
Full Name:	Last	First	MI	
Title:		Preferred name (for badge):		
Employer:				
Address:				
City:		State: Zip:		
Telephone:	Fax:	e-mail:		
	FPHRA Me	embership		
lf you would like	to obtain or renew membership for 2017	, complete this section. Ot	herwise, skip this section.	
Select the applic	able membership below:			
New Men	nbership Renew Membership			
Associate	e \$150.00 Agency \$135.00	Individual \$55.00	Qualified Retiree\$25.00	
Student				
Are you a:	First Time Attendee Past Presid	lent Honorary L	ifetime Member	
	Pre-Conferenc	e Registration		
Select one of th	ne following tracks: Master's Pr	ogram Four	ndation Program	
Full Pre-Conferer	nce Registration (Includes all pre-conferen	ce and social activities)	Check or Credit Card	
Member	(Paid on or prior to May 31, 2017)	\$150.00	\$	
	(Paid after <b>May 31, 2017)</b>	\$205.00	\$	
Non-Member	(Paid on or prior to <b>May 31, 2017</b> )	\$200.00	\$	
	(Paid after <b>May 31, 2017</b> )	\$255.00	\$	
Total			\$[	



Full Conference I	Conference R Registration (Includes all conference ar	_	Check or Credit Card			
Member	(Paid on or prior to May 31, 2017)	\$325.00	\$			
	(Paid after May 31, 2017)	\$375.00	\$			
Non-Member	(Paid on or prior to <b>May 31, 2017</b> )	\$380.00	\$			
	(Paid after <b>May 31, 2017</b> )	\$430.00	\$			
Total			\$			
	Daily Conference	e Registration				
(Except for the Monday luncheon, does not include social activities. Purchase optional social event tickets below.)  Member Non-Member*						
Monday	Tuesday Wednesday	\$130.00/day \$	180.00/day \$			
Optional Tickets - Social Events for Daily Conference Attendees or Guests						
Sunday	(Reception)	#@	\$65.00=			
Monday	(Luncheon)	#@	\$65.00=			
Tuesday	(Dinner/Dance)	#@	\$25.00= \$			
Wednesday	(Breakfast)	#@	\$60.00=			
Guest	(All Social activities)	#@ \$2	200.00= \$			
Guest Name(s)	Last:	First:				
Total (From Page 1	\$					
* Non-member rat	tes above include individual FPHRA me	mbership dues through [	December 31, 2017			

Special dietary restrictions/special accommodations or needs: Please attach instructions.

**Cancellation Policy:** Full refund will be made provided that written notice is postmarked no later than June 30, 2017. Requests for refunds after that date shall be subject to a \$50.00 cancellation fee. Substitutions are permitted.



### **PAYMENT INFORMATION**

### Pay using a Check

Please make checks payable to: FPHRA - (Tax ID#592808589)

Please mail completed Registration Form and check to:

FPHRA 401 East Las Olas Blvd, #130-452 Fort Lauderdale, Florida 33301

#### Pay using a Credit Card

Please scan and e-mail or fax the completed Registration Form and this Payment Information form to <a href="mailto:treasurer@fphra.org">treasurer@fphra.org</a> or (888) 758-6286.

	MasterCard Visa (American Express and Discover Cards are n	ot accepted)
Cardholder Name: _		
Billing Address:		
City, State & Zip:		
Phone Number:		
Email Address:		
Card Number:		
Security Code:		
Expiration Date:		
Signature:		

If you have any questions or need assistance regarding your payment, please contact: <a href="mailto:treasurer@fphra.org">treasurer@fphra.org</a>.

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