

FNAME REGISTRATION

Return registration form & check to: Sandy Osteen, 8759 Bay Pointe Dr., Tampa, FL 33615
\$250.00 for each Registration

*Deduct \$25 for each additional registration from the same organization from the Registration fee
Make Checks Payable To: FNAME, visit our web site at: www.fname.org

2010 FNAME Annual Conference, September 9, 10 & 11 2010
TRADEWINDS ISLAND RESORTS ON ST. PETE BEACH
Hosted by THE ST PETERSBURG TIMES
Deadline for registration: August 6th, 2010

REGISTRATION FEE: The registration fee admits you to all breakfast buffets, conference sessions and cocktail hours. One ticket to each of the following: Friday Luncheon and Friday Night Banquet. Please fill out the enclosed Luncheon/Banquet form to be sure your tickets are included.

SPOUSE/GUEST: Cocktail hours are free for any registered member's spouse/guest. If you wish to have your spouse/guest attend the Luncheon or the Banquet, you may purchase tickets for those events. Please fill out the enclosed luncheon & banquet form.

HOTEL RESERVATIONS: You may make your hotel reservations by **CALLING THE TRADEWINDS Island Resorts 1-800-808-9833** and be sure to let them know that you are with The FNAME Conference 2010.

REGISTRATION DEADLINE: Envelope must be postmarked by midnight, AUGUST 6th, 2010 to receive the normal registration fee. **A LATE REGISTRATION FEE (additional \$25.00 for each member)** will apply after that date. Make checks payable to FNAME. **NOTE:** August 6th is also the deadline to **MAKE SURE** that your name will appear on the Attendee list and that your registration package will be complete.

REGISTRATION REFUND POLICY: Registration fee will be refunded if notice of cancellation is made to FNAME by 5PM, July 23rd. Cancellation after that date will receive no refund.

FNAME Office: (813) 220-4402 or Fax (813) 290-9180 or e-mail sandy@fname.org
MUST BE POSTMARKED BY August 6th OR LATE REGISTRATION FEE WILL APPLY

NAME _____
(as you wish to appear on badge)

E-mail Address: _____

FIRM _____

Phone Number: _____

POSITION/TITLE _____

GUEST/SPOUSE NAME _____

Address: _____

(ONLY IF HE/SHE IS ATTENDING)

MAKE CHECK PAYABLE TO: FNAME (SORRY NO CREDIT CARDS ACCEPTED)
AMOUNT PAID _____

**Web Site www.FNAME.org FEI Number 59-2178356
FAX (813) 290-9180 or email: sandy@fname.org**