



2018-2019 MEMBERSHIP AND CONFERENCE REGISTRATION

MEMBER INFORMATION

NAME			
SCHOOL/INSTITUTION			
ADDRESS	CITY	STATE	ZIP CODE
EMAIL		PHONE	

MEMBERSHIP ONLY REGISTRATION

CATEGORY <i>(SELECT ONLY ONE)</i>	STUDENTS <i>Electronic only EF&P Journal</i>	REGULAR MEMBERSHIP <i>I wish to receive a hardcopy of EF&P Journal</i> <input type="checkbox"/>
MEMBERSHIP ONLY <i>(No Conference)</i>	\$60 <input type="checkbox"/>	\$100 <input type="checkbox"/>

MEMBERSHIP + 44th ANNUAL CONFERENCE

Kansas City Marriott Downtown - Kansas City, Missouri - March 21-23, 2019

CATEGORY <i>(SELECT ONLY ONE)</i>	STUDENTS <i>Electronic only EF&P Journal</i>	REGULAR MEMBERSHIP <i>I wish to receive a hardcopy of EF&P Journal</i> <input type="checkbox"/>
EARLY BIRD REGISTRATION <i>Sign up before Feb. 1 2019</i>	\$260 <input type="checkbox"/>	\$450 <input type="checkbox"/>
REGULAR REGISTRATION <i>Sign up after Feb. 1 2019</i>	\$310 <input type="checkbox"/>	\$500 <input type="checkbox"/>
LATE REGISTRATION <i>Sign up after Mar. 1 2019</i>	\$360 <input type="checkbox"/>	\$550 <input type="checkbox"/>

ANNUAL MEMBERSHIP IS 12 MONTHS, BEGINNING ON THE DATE OF ACTIVATION OR RENEWAL

PAYMENT INFORMATION

PAYMENT TYPE: CREDIT CARD CHECK (IF PAYING BY CHECK, PLEASE MAKE CHECK PAYABLE TO 'AEFP')

TYPE OF CARD	CARD NUMBER	EXP DATE	CVV
NAME ON CARD		SIGNATURE	

BILLING ADDRESS (IF DIFFERENT THAN ADDRESS ABOVE)

ADDRESS	CITY	STATE	ZIP CODE
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