

CONFERENCE REGISTRATION FORM

PaFED Spring 2009 Conference
April 23-24, 2009
 Sheraton Bucks County
 Langhorne, PA

Return completed form with payment to:

PaFED
 3718 West Lake Road
 Erie, PA 16505

Please complete and return this form. Registration must be received by April 16, 2009
 Up to (4) Attendees & Spouses may register using a single form.

COMPANY NAME _____ **Date:** _____

Primary Contact Email: _____

Phone: _____ **FAX:** _____

Attendee Name (please print clearly)

Event Fee

PaFED Spring Golf Outing @ Bensalem Country Club (4/23/09) (Includes greens fees and golf cart)

Golf Outing Schedule - Lunch On Your Own @ NOON / TEE time for PaFED Golfers @ 1:00pm...

# 1	_____	@	\$55.00	_____
# 2	_____	@	\$55.00	_____
# 3	_____	@	\$55.00	_____
# 4	_____	@	\$55.00	_____

Please let us know if you have a specific group or foursome that you prefer to be partnered with...

Membership Buffet Dinner & Entertainment (4/23/09)

Thursday Evening Event - Reception @ 6:00pm with Dinner and Entertainment beginning @ 7:00pm...

# 1	_____	@	\$45.00	_____
# 2	_____	@	\$45.00	_____
# 3	_____	@	\$45.00	_____
# 4	_____	@	\$45.00	_____

PaFED Conference Attendee (4/24/09)

Friday Morning & Afternoon Event - Includes membership breakfast, buffet lunch, and conference seminars

# 1	_____	@	\$90.00	\$90.00
# 2	_____	@	\$85.00	_____
# 3	_____	@	\$80.00	_____
# 4	_____	@	\$80.00	_____

Spouses or Significant Others (Those not attending Friday meeting or lunch)

# 1	_____	@	N/C	_____
# 2	_____	@	N/C	_____
# 3	_____	@	N/C	_____
# 4	_____	@	N/C	_____

Grand Total _____

For payment by credit card - Complete the following and Fax to 814-838-5127

Circle One: *Am. Express* *Visa* *MasterCard*

Card # _____ Expiration Date _____

Name as appears on card _____

Authorizing Signature _____