

SPRING SEMINAR 2011 Registration

"Facing the Future Together"

Please fill out the below information and submit to reserve your seat for this year's seminar and mail to: AGA, P.O. Box 99834, Cleveland, Ohio 44199-0834. The cost of the seminar is \$90 and payment information can be found on the website, www.agacleveland.org/PDC.

First Name (As to be displayed on nametag)

Last Name

OPTIONIAL: What certifications do you hold? (Choose all that apply).

- | | | |
|-------------------------------|-------------------------------|-------------------------------|
| <input type="checkbox"/> CAP | <input type="checkbox"/> CFM | <input type="checkbox"/> CISA |
| <input type="checkbox"/> CDFM | <input type="checkbox"/> CGFM | <input type="checkbox"/> CMA |
| <input type="checkbox"/> CFE | <input type="checkbox"/> CIA | <input type="checkbox"/> CPA |

Employer

Address 1:

Address 2:

City

State:

**Zip/ Postal
Code:**

Work Phone:

Fax:

Email:

Which organization(s) are you a member of: (Choose all that apply)

- | | |
|------------------------------|-------------------------------|
| <input type="checkbox"/> AGA | <input type="checkbox"/> ASMC |
|------------------------------|-------------------------------|

Will a sign language interpreter be needed?

- Yes No

Each lunch entrée includes: salad, Chef's seasonal vegetables and starch, dessert, fresh, baked breads, coffee and herbal tea service.

Please Indicate your entrée choice:

- Chicken Romano with Lemon-Herb Sauce
 Sweet Chili-Soy Glazed Oven-Roasted Salmon
 Butternut Squash Ravioli (Vegetarian Option)