



EXHIBIT REPRESENTATIVE REGISTRATION FORM

As an Exhibitor at the NEAFCS 2024 Annual Session you receive two (2) complimentary onsite representatives. If your company will need additional name badges than those provided please fill out this form and return Elizabeth Lane at elane@executiveoffice.org. Each additional badge (over the 2 allocated) will be an additional \$60.

IMPORTANT – Exhibit badges include lunch Wednesday in the Exhibit Hall. If you are interested in attending any additional Annual Session events/meals, you must purchase these separately.

Exhibiting Company: _____
Address: _____
City/State/Zip: _____
Telephone: _____ Fax: _____ Email: _____

Representative Name & Email Address		Registration Fee
(1) _____ <small>(Print name exactly as it is to appear on name badge)</small>	Email: _____	Complimentary
(2) _____ <small>(Print name exactly as it is to appear on name badge)</small>	Email: _____	Complimentary
(3) _____ <small>(Print name exactly as it is to appear on name badge)</small>	Email: _____	\$60
(4) _____ <small>(Print name exactly as it is to appear on name badge)</small>	Email: _____	\$60

Additional Tickets	Registration Fee
Welcome Event (Monday 6:00 PM – 8:00 PM)	\$125 X _____ = _____
Closing Awards Banquet (Thursday 6:00 PM – 8:00 PM)	\$125 X _____ = _____
TOTAL: _____	

Payment Information

☐ Check Enclosed (*made payable to NEAFCS*) Check Number: _____ Amount Enclosed: _____

Credit Card: ☐ Visa ☐ MasterCard ☐ Amex Amount to charge: _____

Card #: _____ Exp. Date: _____ Security Code*: _____

*This is the 3 digit number found next to the signature panel on the back of the card. For AMEX this is the 4 digit code located on the front of the card.

Name on Card: _____ Signature: _____

Billing Address & Zip Code: _____