Association Education Alliance

Registration Form
(Please complete and return by Tuesday, November 15, 2016)

AEA Meeting Attendee Information

Name/Title: _____ **Email Address:** _____

Please check here if you plan to attend the CEO-Only Session on Tuesday ☐
Please check here if you plan to attend the Welcome Dinner on Tuesday ☐

Please specify if you have any special dietary restrictions or needs: _____

Name/Title: _____ **Email Address:** _____

Please check here if you plan to attend the CEO-Only Session on Tuesday ☐
Please check here if you plan to attend the Welcome Dinner on Tuesday ☐

Please specify if you have any special dietary restrictions or needs: _____

Name/Title: _____ **Email Address:** _____

Please check here if you plan to attend the CEO-Only Session on Tuesday ☐
Please check here if you plan to attend the Welcome Dinner on Tuesday ☐

Please specify if you have any special dietary restrictions or needs: _____

Association Information

Assoc. Name: _____
Phone: _____
E-Mail: _____

Agenda Suggestions

Please submit discussion items to be added to the Meeting Agenda:

_____

_____

Registration Fee:

_____ **PERSON(S) ATTENDING MEETING x $350.00 PER PERSON**   = $ _____

Above fee does not include Tuesday Welcome Dinner. As usual, this dinner will be billed back to each attendee after the event.

Payment Information: to pay by credit card please visit aeamembers.net. If paying by check *please make checks payable to "Association Education Alliance" and send with completed registration form to:*

AEA
105 Eastern Avenue ✦ Suite 104
Annapolis, MD 21043

Registration Form Submission:
Please fax your registration form to AEA at (410) 263-1659. You may also submit your registration through the mail via the address above, or email to jforte@aeamembers.net.

DEADLINE FOR REGISTRATION: Tuesday, November 15, 2016