


## 3 Easy Ways to Register...


### ONLINE

 [www.agacgfm.org](http://www.agacgfm.org)  
It's fast and secure  
Credit Cards Only


### EMAIL

 [meetings@agacgfm.org](mailto:meetings@agacgfm.org)  
24 hours a day  
Credit Cards and POs Only

### MAIL

 2208 Mount Vernon Avenue  
Alexandria, VA 22301  
All Payment Types

### QUESTIONS

 For more information, contact 800.AGA.7211 or [meetings@agacgfm.org](mailto:meetings@agacgfm.org)

## Attendee Information

### Name and Contact Info

Full Name \_\_\_\_\_

Nickname/First Name for Badge \_\_\_\_\_

Professional Designations (check all that apply):

CGFM  CPA  Ph.D.  Other \_\_\_\_\_

Member ID # \_\_\_\_\_

Job Title \_\_\_\_\_

Organization \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

This email address will be used for confirmations, updates and badge pick-up instructions. Exhibitors and sponsors are permitted a one-time use of attendee email addresses for promotional purposes unless you check the box below. We will NOT sell your email address.

Check here if you do not want your email address sent to exhibitors.

### Role Within Organization

Executive  Mgmt./Supervisory  Staff/Analyst

Operations  Other \_\_\_\_\_

### Primary Responsibility Area

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Academia          | <input type="checkbox"/> Accounting    | <input type="checkbox"/> Administration      |
| <input type="checkbox"/> Auditing          | <input type="checkbox"/> Budgeting     | <input type="checkbox"/> Consulting          |
| <input type="checkbox"/> Financial Mgmt.   | <input type="checkbox"/> Grants Mgmt.  | <input type="checkbox"/> Information Systems |
| <input type="checkbox"/> Investigation     | <input type="checkbox"/> Legal         | <input type="checkbox"/> Mgmt./Admin.        |
| <input type="checkbox"/> Performance Mgmt. | <input type="checkbox"/> Program Mgmt. |  |
| <input type="checkbox"/> Other _____       |  |  |

### Please Indicate Any Special Needs

*Dietary:*

Diabetic  Gluten-Free  Vegan

No Seafood  Shellfish Allergies  Vegetarian

Other \_\_\_\_\_

Physical: Please check here if you require special accommodations to participate in this event and provide a written description of your needs.

### In Case of Emergency During the Training, Please Contact:

Name \_\_\_\_\_

Phone \_\_\_\_\_

## Registration Fees

**National Leadership Training**  
Washington, D.C. | Feb. 27-28

Early Bird (By Feb. 2)  \$550  
Standard (After Feb. 2)  \$650

**Professional Development Training**  
New Orleans | July 21-24

Early Bird (By June 29)  \$900  
Standard (After June 29)  \$1,000

**Internal Control & Fraud Prevention Training**  
Washington, D.C. | Sept. 18-19

Early Bird (By Aug. 31)  \$550  
Standard (After Aug. 31)  \$650

**Become a Member Today and SAVE!**

Government  \$100  
Private Sector  \$160

<b>AGA Member</b>	<input type="checkbox"/> \$550	<input type="checkbox"/> \$650	<input type="checkbox"/> \$900	<input type="checkbox"/> \$1,000	<input type="checkbox"/> \$550	<input type="checkbox"/> \$650
<b>Non-Member</b>	<input type="checkbox"/> \$725	<input type="checkbox"/> \$825	<input type="checkbox"/> \$1,100	<input type="checkbox"/> \$1,200	<input type="checkbox"/> \$725	<input type="checkbox"/> \$825

**Cancel by:** February 8, 2019

June 21, 2019

August 23, 2019

## Method of Payment

Total Amount Due: \$ \_\_\_\_\_ (Include Membership Dues if Applicable)

- Check Enclosed** (made payable to AGA).
- Purchase Order # \_\_\_\_\_ is enclosed.** Please send me an invoice.
- American Express**  **Discover**  **Master Card**  **VISA**

Card Number \_\_\_\_\_

Expiration Date \_\_\_\_\_

Card Holder Name \_\_\_\_\_

Card Holder Email \_\_\_\_\_

Card Holder Signature \_\_\_\_\_

Card Holder Phone \_\_\_\_\_

### Payment must accompany registration form!

Conference registration will NOT be processed or confirmed until payment or a copy of the purchase order is received. Issued POs must be paid before the cancellation date for registrations to be valid. Only U.S. dollars are accepted. **AGA Federal Tax ID #53-0217158**

**Cancellation/Substitution Policy:** Refunds, less a \$50 processing fee per registrant, for each cancellation requests received in writing by the cancellation dates above. Refunds will not be granted after this date. No shows are responsible for full payment. **Substitution Policy:** If you are unable to attend the training and have already registered, you may designate another person to take your place. Just complete a registration form for the new attendee and indicate the name of the individual that is being replaced. Membership status is not transferable. Additional fees may be required based on the replacement's membership status. Please visit each training's registration website for further details.