

September 19-20, 2023

Washington, D.C. or virtual

## **Attendee Registration Form**

## Attendee Information I'm Attending (required answer selection) **Primary Responsibility Area:** ☐ In-Person ☐ Academia ☐ Accounting ☐ Administration ☐ **Virtually** (Home or Office) ☐ Auditing ☐ Budgeting ☐ Consulting Please note that in-person and virtual registration fees are ☐ Financial Mgmt. ☐ Grants Mgmt. ☐ Inf. Systems the **SAME** ☐ Mgmt./Admin. ☐ Investigation ☐ Legal ☐ Performance Mgmt. ☐ Program Mgmt. Name and Contact Info: Full Name Nickname/First Name for Badge If Attending In-person Professional Designations (check all that apply): □ CGFM □ CPA □ Ph.D. □ Other \_\_\_\_\_ Please Indicate if you have any dietary restrictions: Member ID # \_\_\_\_\_ Job Title \_\_\_\_\_ Organization\_\_\_\_\_ Please indicate if you require special accommodations: Mailing Address \_\_\_\_\_ City \_\_\_\_\_State\_\_\_\_ ZIP Code \_\_\_\_\_ Phone Please provide your emergency contact if any: Email This email address will be used for confirmations, updates, and badge pick-up instructions. Exhibitors and sponsors are permitted a onetime 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. **Registration Fees** Early Bird (by August 25) AGA Members: ☐ \$ 575.00 **Non-Members:** □ \$750.00 Standard (after August 25) AGA Members: ☐ \$ 675.00 **Non-Members:** □ \$850.00 **Method of Payment** Total Amount Due: \$ ☐ American Express ☐ Discover ☐ Master Card ☐ VISA ☐ PO/SF-182/Check\* Card Number \_\_\_\_\_ Zip Code\_\_\_\_\_ Security Code\_\_\_\_\_ Card Holder Name \_\_\_\_\_ Card Holder Email \_\_\_\_\_

**Cancellation, Substitution & Refund Policy**: Please visit the <u>Fraud 2023 Registration Website</u> for more information on deadlines and additional fees. Email: For Credit Cards & PO/SF-12, email this form to meetings@agacgfm.org. By mail: All payment types. Mail completed registration form with payment to AGA – 2208 Mount Vernon Avenue, Alexandria, VA 20301- 1314.

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