



AGA
National Leadership
Training 2023



| | |
|---------------------------|---------------|
| Company: | |
| Principal Contact: | Phone: |
| E-mail: | |

You are entitled to **3 complimentary exhibit passes** for company representatives to staff your booth. Includes access to all functions held in the Solutions Hall only. Does not include CPEs. You may register additional booth staff at **\$100.00 per person**. *Payment for extra booth staff is required prior to the registration being processed (see below).*

EXHIBITOR ADDITIONAL REGISTRANTS:

| | | |
|--------------------------------------|-------------------|----------------------------------|
| #1 - \$100 | Full Name: | Name for Badge: |
| Job Title: | | Designations (i.e. CGFM): |
| E-mail: | | |
| Food Allergies/Special Needs? | | Emergency Contact Info: |
| #2 - \$100 | Full Name: | Name for Badge: |
| Job Title: | | Designations (i.e. CGFM): |
| E-mail: | | |
| Food Allergies/Special Needs? | | Emergency Contact Info: |
| #3 - \$100 | Full Name: | Name for Badge: |
| Job Title: | | Designations (i.e. CGFM): |
| E-mail: | | |
| Food Allergies/Special Needs? | | Emergency Contact Info: |
| #4 - \$100 | Full Name: | Name for Badge: |
| Job Title: | | Designations (i.e. CGFM): |
| E-mail: | | |
| Food Allergies/Special Needs? | | Emergency Contact Info: |
| #5 - \$100 | Full Name: | Name for Badge: |
| Job Title: | | Designations (i.e. CGFM): |
| E-mail: | | |
| Food Allergies/Special Needs? | | Emergency Contact Info: |

ADDITIONAL REGISTRATIONS & LUNCH TICKETS WILL NOT BE PROCESSED WITHOUT PAYMENT

| | | |
|---|---------------------------|-------------------------|
| <input type="checkbox"/> AMEX <input type="checkbox"/> Discover <input type="checkbox"/> MasterCard <input type="checkbox"/> Visa | | Expiration Date: |
| Card Number: | Card Holder Name: | |
| Signature: | Card Holder Email: | |

Please complete and return this form to mcordova@agacgfm.org no later than Friday, Feb. 10,