



VIRTUAL SPEAKER CONTACT REGISTRATION FORM

Please complete this form for EACH speaker.

Please do not use this form for moderators. Email completed form to Stephanie Shaer at sshaer@agacgfm.org on or before **Friday, June 20, 2025.**

SPEAKER CONTACT INFORMATION: Information listed in BLUE will be used in promotional items.			
Full Name:		Informal Name:	
Job Title:		Designations:	
Organization:		Organization Social Media Handle:	
Personal Social Media Handle, i.e. LinkedIn, Twitter (for marketing purposes):			
Address:			
City:	State:	Zip:	
Phone:	E-mail:		
SPEAKING SESSION DETAILS: If more than one session, list session ID only will suffice.			
Session ID(s):	Session Date(s):	Session Time(s):	
Session title(s):			
SPEAKER REGISTRATION OPTIONS: Moderators must register using the Moderator Registration Form.			
<input type="checkbox"/> My session(s) only – Free <input type="checkbox"/> Entire day of my session(s): \$100 Government/Academia/Non-Profit \$150 Private		<input type="checkbox"/> The entire training (includes all education sessions to earn up to 14 CPEs, 2 days of training): \$150 Government/Academia/Non-Profit \$200 Private	
PAYMENT INFORMATION Payment must accompany this registration form to be processed. AGA Federal Tax ID #53-0217158. AGA 2208 Mt. Vernon Avenue, Alexandria, VA 22301			
<input type="checkbox"/> Check or Government Purchase Order <u>Enclosed</u>		<input type="checkbox"/> AMEX <input type="checkbox"/> Discover <input type="checkbox"/> MasterCard <input type="checkbox"/> Visa	
Card Number:		Expiration Date:	
Card Holder Name:		Card Holder Email:	
Signature:			