

VLGAA FALL CONFERENCE REGISTRATION FORM

FRIDAY, OCTOBER 2, 2009

SHERATON PARK SOUTH

9901 MIDLOTHIAN TURNPIKE

RICHMOND, VA 23235

PLEASE FILL IN:

NAME OF ORGANIZATION: _____

STREET ADDRESS: _____

CITY/STATE/ZIP _____

MAIL CHECK AND FORM TO:

VLGAA Treasurer

Dawn Hope

City of Roanoke

215 Church Ave., Rm 502

Roanoke, VA 24011

	First Name	Last Name	I.	First Name for Badge	e-mail	Work Phone	Work Fax	1 - 4 \$85/ea	5 or more \$70/ea	
1										
2										
3										
4										
5										
6										
7										
8										
9										
10										
								TOTAL FEE:		

Add more rows as necessary.

No cancellation refunds will be given, but substitutions are allowed.

If you have any questions, please call: Cathy Peppers, (804) 748-1240

Discount if 5 or more individuals are registering from one locality.