

2011 TAF&E NON-MEMBER CONVENTION REGISTRATION

Return registration materials to the TAF&E office by mail: P.O. Box 1025, Fredericksburg, Texas 78624

or by fax: 830/990-8576. Call 800/990-1332 or email pennyreeh@kfc.com with any questions.

EARLY BIRD REGISTRATION MUST BE RECEIVED BY 5 P.M. ON NOVEMBER 19.

Hotel reservations must be made directly with the Renaissance Austin Hotel by calling 512/343-2626 and asking for the TAF&E Convention. Reservation deadline is December 18, 2009. After the deadline, rooms will be available on a rate/space basis only.

Organization Name _____ Contact Name _____

Address _____ City, State, Zip _____

Phone Number _____ Email Address _____

**1. PROFESSIONAL DEVELOPMENT OR
TELP SEMINAR — Jan 6-7, 2011**
PRINT FULL NAME TO APPEAR ON BADGE

First Time Attendee? EARLY BIRD On or before 11/20 REGULAR After 11/20

_____	<input type="checkbox"/>	<input type="checkbox"/> \$100	<input type="checkbox"/> \$125	_____
_____	<input type="checkbox"/>	<input type="checkbox"/> \$90*	<input type="checkbox"/> \$115*	_____
_____	<input type="checkbox"/>	<input type="checkbox"/> \$90*	<input type="checkbox"/> \$115*	_____
_____	<input type="checkbox"/>	<input type="checkbox"/> \$90*	<input type="checkbox"/> \$115*	_____

*** REGISTER MORE THAN ONE PERSON AND SAVE!**

SECTION 1 SUBTOTAL \$

**2. CONVENTION REGISTRATION —
January 7-9, 2011**
PRINT FULL NAME TO APPEAR ON BADGE

First Time Attendee? EARLY BIRD On or before 11/20 REGULAR After 11/20

_____	<input type="checkbox"/>	<input type="checkbox"/> \$160	<input type="checkbox"/> \$190	_____
_____	<input type="checkbox"/>	<input type="checkbox"/> \$160	<input type="checkbox"/> \$190	_____
_____	<input type="checkbox"/>	<input type="checkbox"/> \$160	<input type="checkbox"/> \$190	_____
_____	<input type="checkbox"/>	<input type="checkbox"/> \$160	<input type="checkbox"/> \$190	_____
_____	<input type="checkbox"/>	<input type="checkbox"/> \$160	<input type="checkbox"/> \$190	_____
_____	<input type="checkbox"/>	<input type="checkbox"/> \$160	<input type="checkbox"/> \$190	_____
_____	<input type="checkbox"/>	<input type="checkbox"/> \$160	<input type="checkbox"/> \$190	_____
_____	<input type="checkbox"/>	<input type="checkbox"/> \$160	<input type="checkbox"/> \$190	_____

SECTION 2 SUBTOTAL \$

Cancellation Policy

Cancellations received prior to Dec. 1 will receive a full refund.

Cancellations between Dec. 1 and Dec. 17 will receive a 50% refund. No refund after Dec. 17.

TOTAL REGISTRATION  \$

I'd like to pay by CREDIT CARD Card# _____
Circle one: MC VISA AmEx Discover Exp. Date _____
Authorization Signature _____ Amount _____

I'd like to pay by CHECK/
MONEY ORDER Check # _____ Amount _____