



CONVENTION REGISTRATION FORM

PLEASE PRINT

Last Name _____ First Name: _____ MI: _____

Address: _____ City: _____ State: _____ Zip+4: _____

Home Phone: _____ Work Phone: _____ Home email: _____

Will you need an interpreter? Yes: _____ No: _____ Special Dietary Needs? Yes: _____ No: _____

COMPLETE PACKAGE	MEMBERS	NON-MEMBERS
Registration - Prior to May 26, 2017	\$175	\$175
On Site Registration- Cash Only	\$205	\$205
After May 26, 2017 - No Mail-In Registrations		

EXTRA TICKETS	EXTRA TICKET PRICE	# TICKETS AMOUNT PAID
Friday	\$60	
Saturday	\$65	
Total Amount Submitted (Registration including extra tickets)		Grand Total

Mail completed form & payment to: NAPS GA/FL Bi-State Convention
 PO Box 16515
 Atlanta, GA 30321-0515

For additional information contact Jacquese Thompson 770-316-5976 or Marie Smith at 404-667-1384