



California Association of
Flower Growers & Shippers

2016 MEMBER MEETING REGISTRATION FORM

Submit One Registration Form per Person (Please copy this form for additional registrations.)

Registration Applicant (Print Name as It Should Appear on Badge)

Company Name

Company Mailing Address

City/State/Zip

Business Telephone

Business Fax

E-Mail Address

Please select at least one of the member meetings below:

	Early Bird Fee (\$25 per meeting)	On-Site Fee (\$35 per meeting)
Tue, August 9, Hyatt Regency – Monterey, CA	until 08/02	after 08/02
Tue, August 16, Park Hyatt Aviara - Carlsbad, CA	until 08/09	after 08/09
Thu, August 18, Fess Parker – Santa Barbara, CA	until 08/11	after 08/11

**** PLEASE KEEP A COPY OF THIS REGISTRATION FOR YOUR RECORDS ****

Cancellation Policy: In the event of cancellation of your registration, the association will gladly refund the full amount paid, pending receipt of written notification no later than one week prior to the meeting dates shown above.

No refunds will be issued for cancellations after those dates.

*** Membership dues must be paid in full and you must be a member in good standing prior to registering for the Member Meeting. ***

Payment Must Accompany Registration Form

Check Enclosed (Payable to CAFG&S) (Mail to: CAFG&S, 1500 41st Avenue, Suite 240, Capitola, CA 95010)

MasterCard VISA (Fax credit card payment info to: 831-479-4914)

Card Number: _____ Exp Date: _____ CID # (3 digits on back of card): _____

Billing Address As It Appears On Your Credit Card Statement:

Billing Phone Number: _____

Please Print Name of Card Holder

Signature of Card Holder