



1-Day Classroom Training

Course Name: _____
 Date: _____ Location (city/state): _____
 By Early-Bird Registration Date \$495 Mbr \$915 Non-Mbr \$375 Govt
 After Early-Bird Registration Date \$595 Mbr \$1,015 Non-Mbr \$375 Govt

2-Day Classroom Training

Course Name: _____
 Date: _____ Location (city/state): _____
 By Early-Bird Registration Date \$795 Mbr \$1,195 Non-Mbr \$615 Govt
 After Early-Bird Registration Date \$895 Mbr \$1,295 Non-Mbr \$615 Govt

1/2-Day Online Course

Course Name: _____
 Date: _____
 By Early-Bird Registration Date \$395 Mbr \$815 Non-Mbr \$325 Govt
 After Early-Bird Registration Date \$445 Mbr \$865 Non-Mbr \$325 Govt

1-Day Online Course

Course Name: _____
 Date: _____
 By Early-Bird Registration Date \$495 Mbr \$915 Non-Mbr \$375 Govt
 After Early-Bird Registration Date \$595 Mbr \$1,015 Non-Mbr \$375 Govt

WEBExpress Session

Session Name: _____
 Date: _____
 By Early-Bird Registration Date \$355 Mbr \$535 Non-Mbr \$285 Govt
 After Early-Bird Registration Date \$405 Mbr \$585 Non-Mbr \$285 Govt

ADDITIONAL LINES: First line = \$345 | 2-10 lines = \$145 for each additional line | >10 lines = \$125 for each

2-10 additional lines = \$145 x _____ (# of additional lines) = \$ _____
 >10 additional lines = \$125 x _____ (# of additional lines) = \$ _____

Spring Conference • May 7-9 • Orlando, FL

By March 29 \$995 Mbr \$1,495 Non-Mbr \$695 Govt
 After March 29 \$1,300 Mbr \$2,000 Non-Mbr \$695 Govt
 Scramble Golf Tournament \$160
 Scramble Golf Tournament Guest \$160 Golf Guest _____
 Golf Club Rental \$30
 Guest Golf Club Rental \$30
 May 7 – Opening Reception Guest \$80 Guest _____
 May 8 – Themed Party Guest \$90 Guest _____

No Refunds for Golf Cancellations/Club Rentals. Substitutions Encouraged. Full registration and cancelation policy at [naggl.org/cancelpolicy](http://www.naggl.org/cancelpolicy).



Return Form To:
Fax: 405.377.3931
Mail: NAGGL, 215 East 9th Ave,
 Stillwater, OK 74074
Scan and Email To: info@naggl.org

1 Attendee Information

Name (as it should appear on your badge) _____

Company _____

Address _____

City _____ State _____ Zip _____

Phone _____

Email (required for confirmation) _____

2 Total Payment Due \$ _____

3 Method of Payment Visa MC AmEx Check
 Please use credit I have on file

Credit Card # _____

Expiration Date (MO/YR) _____ CVV # _____

Address Associated With This Credit Card _____

Print Cardholder's Name _____ Cardholder's Signature _____

4 Conference Liability Waiver and Special Needs

I am able to participate in NAGGL events and assume responsibility for my own well being. I agree not to allow anyone to participate in my place without prior notification to NAGGL.

Signature _____

NAGGL will work with the host hotel to provide vegetarian, gluten free or kosher meals for sit-down luncheon events only. Attendees must select their preference at the time of registration. All other food is served buffet-style and registrants are solely responsible for their food selections.

Kosher Meals Vegetarian Meals Gluten Free Meals Physical Handicaps