

Washington Farm Forestry Association 2015 Annual Meeting Registration Form

Full Name(s): _____

Full Name(s) of Additional Registrant(s): _____

Chapter/Organization/Affiliation: _____

Address: _____

City, State, Zip: _____

Phone: _____

Email: _____

(For meeting confirmation and event details only- will not be shared)

	If Received By April 1	If Received after April 1	Quantity	Fee
Conference Registration (per person)	\$100	\$130		
Thursday April 30 Evening Reception	Included in Registration			0
Friday May 1 Educational Programs, Breaks, And Tree Farmer of the Year Lunch	Included in Registration			0
Tree Farm Lunch ONLY (for additional guests not attending full meeting)	\$31	\$31		
Friday Evening Buffet Banquet Meal Preference: Roast Beef _____ Lemon Broiled Salmon _____	\$37.50	\$37.50		
Saturday May 2 Field Tour Registration (per person)	\$30	\$30		
TOTAL DUE				

Please let us know if you have any special dietary needs, including vegetarian _____

WFFA 2015 Annual Meeting Payment Options

1. Make Checks Payable to: "LCFFA" and mail to 150 Jones Road, Centralia, WA 98531

2. Purchase Order#: _____

3. Charge to (circle one): VISA MC Discover

Name on Card: _____ Account#: _____

Exp Date _____ Security Code (back of card) _____ Zip Code (billing address) _____