

2010 NFDA INTERNATIONAL CONVENTION & EXPO REGISTRATION FORM

(Make copies if more than two registrants.)



Firm Name _____

Address _____

City _____ State _____ ZIP _____ Country _____

Telephone _____ Fax _____

Registrant #1 Name _____ Nickname _____ Birthdate ____/____/____

Member ID # (if applicable) _____ Email _____ Cell # _____
(Circle one: NFDA CANA) (needed for confirmation)

Registrant #2 Name _____ Nickname _____ Birthdate ____/____/____

(Circle one: non-licensed guest or licensed funeral director)
Member ID # (if applicable) _____ Email _____ Cell # _____
(Circle one: NFDA CANA) (needed for confirmation)

Youth (under 18 years, if attending) Name(s) _____

NFDA Member Full Conference Fee	By 9/1/10	After 9/1/10	One Day Only (Circle Day)	Total
One registrant from firm	<input type="checkbox"/> \$475	<input type="checkbox"/> \$575	<input type="checkbox"/> \$225/Day S M T W	\$
Additional registrant(s) from firm	<input type="checkbox"/> \$390	<input type="checkbox"/> \$490	<input type="checkbox"/> \$225/Day S M T W	\$
Non-licensed Guest/Spouse	<input type="checkbox"/> \$99	<input type="checkbox"/> \$99		\$
Student/Apprentice	<input type="checkbox"/> \$45	<input type="checkbox"/> \$45		\$

Expo Only	One Day Only (Circle Day)	Total
Registrant 1	<input type="checkbox"/> \$99/Day M T W	\$
Registrant 2	<input type="checkbox"/> \$99/Day M T W	\$

Non-member Full Conference Fee	By 9/1/10	After 9/1/10	One Day Only (Circle Day)	Total
One registrant from firm	<input type="checkbox"/> \$750	<input type="checkbox"/> \$850	<input type="checkbox"/> \$299/Day S M T W	\$
Additional registrant(s) from firm	<input type="checkbox"/> \$390	<input type="checkbox"/> \$490	<input type="checkbox"/> \$299/Day S M T W	\$
Student/Apprentice	<input type="checkbox"/> \$60	<input type="checkbox"/> \$60		\$

Subtotal:

Optional Events (Check those attending)	Registrant #1		Registrant #2		Total
	By 9/1/10	After 9/1/10	By 9/1/10	After 9/1/10	
Saturday					
CANA Crematory Operators Certification	<input type="checkbox"/> Members: \$395 <input type="checkbox"/> Nonmembers: \$495		<input type="checkbox"/> Members: \$395 <input type="checkbox"/> Nonmembers: \$495		\$
NFDA CPC Program	To apply, call 800-228-6332 or visit www.nfda.org/cpc to download an application form. You must meet requirements to enroll.				
Embalming Seminar	<input type="checkbox"/> \$129	<input type="checkbox"/> \$169	<input type="checkbox"/> \$129	<input type="checkbox"/> \$169	\$
Sunday					
President-elect's Motown Madness	<input type="checkbox"/> FREE	<input type="checkbox"/> FREE	<input type="checkbox"/> FREE	<input type="checkbox"/> FREE	\$ 0
Monday					
Recognition Ceremony and Reception	<input type="checkbox"/> FREE	<input type="checkbox"/> FREE	<input type="checkbox"/> FREE	<input type="checkbox"/> FREE	\$ 0
Funeral Directors Under 40	<input type="checkbox"/> \$40	<input type="checkbox"/> \$65	<input type="checkbox"/> \$40	<input type="checkbox"/> \$65	\$
Wednesday					
Closing Celebration	<input type="checkbox"/> \$125	<input type="checkbox"/> \$150	<input type="checkbox"/> \$125	<input type="checkbox"/> \$150	\$
Subtotal:					

Grand Total:

EXPO HOURS		
Monday, October 11, Noon – 5 p.m.	Tuesday, October 12, Noon – 5 p.m.	Wednesday, October 13, 10 a.m. – 1 p.m.

PAYMENT
Check (Must be U.S. dollars drawn on a U.S. bank.) Make payable to: NFDA, 13625 Bishop's Dr., Brookfield, WI 53005-6607. Or FAX to NFDA at 262-789-6977.
Please charge my: American Express Discover MasterCard Visa
Card Number _____ Expiration Date ____/____/____
Name on card (Please print) _____ Signature _____

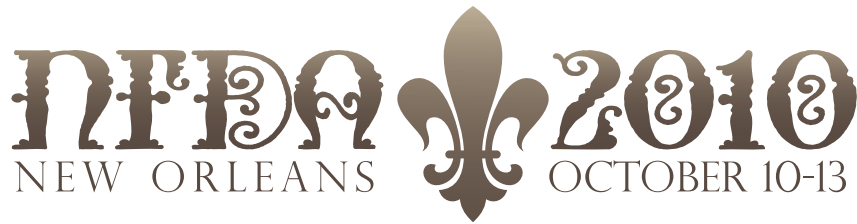
PLEASE TELL US

1. What is your position at your company?
 Owner Manager Staff

2. What is your role in the purchase of funeral-related products and services?
 Final decision Recommend None

3. Do you own or manage a: (Check all that apply)
 Funeral home Cemetery Crematory
 Flower shop Monument company
 Other funeral-related operation _____

4. How soon do you (or your firm) intend to purchase funeral-related products and services?
In the next: 0-3 months 3-6 months 6-9 months
 9-12 months More than one year



REGISTRATION DETAILS

WAYS TO REGISTER

- **Online:** www.nfda.org/neworleans2010
- **Fax form to:** 262-789-6977
- **Mail form to:** NFDA, 13625 Bishop's Dr., Brookfield, WI 53005-6607
- **Call:** 800-228-6332

FILLING OUT FORM

- Print clearly.
- Only 2 registrants per form (unless adding youth).
- Include nickname to be printed on badge (if desired).
- Provide email address (used for confirmation).
- Select your registration fee – write amount in total column.
- One Day Only – be sure to select day(s) for each registrant.
- Expo Only – be sure to select day(s) for each registrant.

OPTIONAL EVENTS

- If Funeral Directors Under 40 and/or Closing Celebration tickets are purchased, you will receive those tickets with your badge.
- Be sure to register for all events each registrant is attending, including free events.

WHAT'S INCLUDED WITH REGISTRATION?

- **Full Conference fees:** access to workshops, general sessions, Expo floor and 3 food vouchers valued at \$10 per day (paid registrant, additional registrant and non-licensed guest/spouse fees only).
- **One Day Only fees:** access to workshops, general sessions (Monday or Wednesday), Expo floor and 1 food voucher valued at \$10 for day indicated.
- **Expo Only fees:** access to Expo floor and 1 food voucher for day indicated (paid fees only) valued at \$10. (Food vouchers not included with free Expo passes.)
- **Student/Student Spouse fees:** access to workshops, general sessions and Expo floor. Does not include food vouchers.

WHAT HAPPENS NEXT?

- Registration confirmation: If you do not receive an email confirmation within two weeks of submitting your registration, call NFDA at 800-228-6332.
- When you arrive in New Orleans, pick up your badge at the NFDA Registration Desk.
- Your badge will be scanned at entry to all workshops, general sessions, the Expo floor and any optional events attended.

POLICIES

- **Registration and Optional Events Cancellation Policy:** Cancellations received in writing and faxed, postmarked or emailed to NFDA at registration@nfda.org before Sept. 1, 2010, entitle the registrant to a full refund minus a \$25 cancellation fee per registrant. Cancellations received Sept. 1 through Oct. 4, 2010, are subject to a \$50 cancellation fee per registrant. No refund requests received after Oct. 4 will be honored.
- **NFDA Cancellation Policy:** NFDA reserves the right to cancel the convention due to circumstances beyond its control. Should circumstances arise that result in the postponement of the convention, registrants will have the option to either receive a full refund or transfer the registration fee to the same program at a future date. NFDA's liability for any cancellation is limited to a refund of the registration fee and shall not extend to any other claims, including, but not limited to: travel expenses, cancellation fees, lost wages, inconvenience and other related costs.
- **Replacement (Lost) Badges:** NFDA Convention badges must be worn. If you lose or forget your badge, a replacement badge can be purchased for a \$50 fee at the NFDA Registration Desk. If you find a badge, please return it to the NFDA Registration Desk.
- **Americans With Disabilities Act (ADA):** NFDA only uses facilities that are in compliance with the ADA. If you require special assistance while attending the Convention, please visit the NFDA Registration Desk.
- **NOTE:** All companies scheduled to exhibit at the 2010 NFDA Expo and their booth assignments, all workshops/presenters and all events are subject to change. Please see the *NFDA Souvenir Program & Expo Buyer's Guide* — available at the Convention site in New Orleans beginning Oct. 10 — for the most accurate listing of information.