

Registration Form



Name _____

Firm _____

Address _____

City _____ State _____ Zip _____

Telephone _____ Email _____

Registration Fee:

\$995 members - \$1395 non-members _____

Name as it should appear on badge _____

Registered participants receive: conference materials, cocktail receptions, breakfast, lunch and dinner on Thursday, breakfast and lunch on Friday and breakfast and lunch on Saturday, daily complimentary wine tasting.

Spouse / Companion Registration Fee \$300

(includes cocktail receptions, daily complimentary wine tasting and dinner on Thursday) _____

Name of Spouse / Companion as it should appear on badge _____

Resort Fee

Napa River Inn, single or double occupancy

\$205 / night (tax included)

Map and directions available at www.napariverinn.com

Wednesday May 25, 2005 _____

Thursday May 26, 2005 _____

Friday May 27, 2005 _____

Saturday May 28, 2005 _____

Room Upgrade

Check here to request a **Superior Room** for the duration of the Conference for \$150 _____

Check here to request a **Deluxe Room** for the duration of the Conference for \$250 _____

If you wish to arrive early or depart late, reservations are subject to space and rate availability. Please call 877.251.8500 for reservations

Please Check here if interested in golf

TOTAL _____

Visa/Mastercard Number _____ Expiration Date _____

Signature Authorizing Charges _____

Return this completed form with your check made payable to afhe by April 15, 2005 to:
Sarah E. Spiers, Executive Director, 4405 Pleasant View Dr., Williamsburg, VA 23188

or
Fax the completed form with the VISA/Mastercard information to:
757.565.5298

Please call 757.565.5297 with questions.