

Registration Form (Please Print or Type)

Full Name _____ E-mail _____
Local Org. _____ District _____
Street Address _____ Phone _____
City/State/Zip _____ Badge Name _____

Registration Fees:

This includes whether you attend by ZOOM, just Saturday or the full weekend . . . \$50.00 _____
1st Timer's Weekend \$45.00 _____
Late / On—Site Fee \$20.00 _____

I plan to attend: IN PERSON _____ VIRTUAL _____

**** REGISTRATION MUST BE PAID IN ORDER TO VOTE, WHETHER ATTENDING PHYSICALLY OR VIRTUALLY. REMOTE REGISTRANTS WILL RECEIVE THE FULL PRINTED CONVENTION PACKET, SHIPPED VIA PRIORITY MAIL.**

Meals:

Friday fundraiser @ \$20.00 _____
Full meal package @ \$ 65.00 _____
Saturday Luncheon only @ \$ 30.00 _____
Saturday Banquet Dinner only @ \$ 40.00 _____

***Dietary Restrictions:** _____

Total Registration Fees, Activities, and Meals . . . \$ _____

Make your check payable to INFBPW and mail it with a completed registration form to:
INFBPW, PO Box 134, Knightstown, IN 46148
(A \$20.00 fee will be charged for returned checks)

Refund Policy: Cancellations must be made in writing to the Treasurer. Those postmarked **NOT LATER** than 04/1/2023 will qualify for a full refund. A \$50.00 cancellation processing fee will apply to refund requests postmarked **AFTER** this deadline. ALL requests must be made within thirty (30) days after the event. See INFBPW Standing Rules.