

AMRA NATIONAL CONVENTION

Kissimmee, FL

June 9 – 10, 2017



NOT-YET-MEMBER REGISTRATION

NAME _____ SPOUSE _____

Address _____ City _____ State _____ Zip _____

FEES:	<u>Cost</u>	<u>#Tickets</u>	<u>Total Paid</u>
Delegates Reception Only	FREE	_____	FREE
Convention Session Registration	\$10.00	_____	_____
Awards Luncheon	\$32.00	_____	_____
Annual Banquet	\$45.00	_____	_____
TOTAL PAID:			\$ _____

Payment by: _____ Check (Make checks payable to AMRA)
_____ Money Order
_____ Credit Card () Visa () Master Card

Credit Card #: _____
Expiration date: _____ 3 or 4 digit code/back of card _____

NAME TAGS

Retiree _____
Full Name Nickname
Spouse _____

MAIL TO:

AMRA National Headquarters – National Convention Registration

5436 Peru St., Suite 1, Plattsburgh, NY 12901 – Tel: 1-800-424-2969 – Fax: 518-324-5204

Email: info@amra1973.org