

**American Accounting Association
2018 APLG/FSA JOINT SEMINAR
February 9-10, 2018 • San Antonio, Texas**

ATTENDEE INFORMATION

Full Name: _____
(PLEASE PRINT) FIRST NAME MIDDLE INITIAL LAST NAME

AAA Member ID#: _____ Nickname for badge: _____

University Name or Affiliation: _____

Mailing Address: ☐ Home ☐ Work _____

City: _____ State: _____ Zip: _____ Country: _____

Email: _____ Phone: ☐ Home ☐ Work _____

REGISTRATION FEE (required) includes name badge (required for admittance to meeting events), meeting program, attendance list, Friday and Saturday breakfasts and lunches, and Friday reception. The Networking Breakfast on Friday pre-registration is required.

Meeting Registration	Registration, on or before January 8, 2018	\$375	\$
	Registration, after January 8, 2018	\$425	\$

I am a current AAA member and would like to join the APLG for 2017-2018	\$50	\$
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OPTIONAL EVENT – Friday, February 9, 2018 (Meeting Registration Required):

Networking Breakfast pre-registration is required	7:00 AM - 8:30 AM	\$0	<input type="checkbox"/> Will attend
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- ☐ I am a member of APLG
☐ I am a member of FSA
☐ This is the first time I have attended this APLG/FSA Seminar

Attendee Special Meal Request: Vegetarian ☐ Vegan ☐ Gluten-Free ☐

Registration Deadline January 24, 2018, 11:59 PM Eastern

GUEST TICKETS (optional) - Paid attendees are welcome to bring a guest to the following social/meal functions for an additional fee. Please indicate below the name of the guest and the specific functions he/she will be attending.

Guest Name _____
(PLEASE PRINT) FIRST NAME LAST NAME

Friday, February 9, Lunch @ \$50 \$ _____
Friday, February 9, Reception @ \$60 \$ _____
Saturday, February 10, Breakfast @ \$40 \$ _____
Saturday, February 10, Lunch @ \$50 \$ _____

Guest Special Meal Request: Vegetarian ☐ Vegan ☐ Gluten-Free ☐

TOTAL \$ _____

PAYMENT

Check Enclosed (payable to AAA): ☐ Credit Card (AMEX, MC and Visa only, provide information below): ☐ AMEX ☐ MC ☐ Visa

Account Number _____ Exp. Date _____

Signature: _____

CREDIT CARD BILLING ADDRESS, IF DIFFERENT FROM ABOVE:

Street Address: _____

City: _____ State: _____ Zip: _____ Country: _____

Registration paid by a credit card may be faxed to AAA at (941) 923-4093. Mail Registration and Check to:

American Accounting Association 9009 Town Center Parkway, Lakewood Ranch, FL 34202

CANCELLATION POLICY: CANCELLATION POLICY: All cancellations must be received in writing at AAA to be processed (email Info@aaahq.org). Cancellation requests received after January 8, 2018 will incur a \$50.00 cancellation charge. No refunds will be available for no-shows or cancellations after January 29, 2018.