



2020 APLG / FSA Annual Seminar
February 7-8 , 2020
The Westin Long Beach, Long Beach, CA
Registration Deadline January 22, 2020

(PLEASE PRINT)

University: _____ Contact: _____
 Street: _____
 City: _____ State/Province: _____ Zip/Postal Code: _____ Country: _____
 Phone: _____ Fax: _____ Email: _____

A. Primary Registration

Registration includes: Includes name badge (required for admittance to meeting events), meeting program, attendance list, Friday and Saturday breakfasts and lunches and Friday reception.

Primary Registration, on or before January 6, 2020 \$375
 Primary Registration, after January 6, 2020 \$425

Total Panel A \$ _____

Special Meal Request:
 Vegetarian Vegan Gluten-Free

Member ID # _____
 Member of APLG Member of FSA First time attendee
 Name: _____
 First Middle Last

Name for Badge: _____

B. 2nd Registration

Registration includes: Includes name badge (required for admittance to meeting events), meeting program, attendance list, Friday and Saturday breakfasts and lunches and Friday reception.

2nd Registration, on or before January 6, 2020 \$325
 2nd Registration, after January 6, 2020 \$375

Total Panel B \$ _____

Special Meal Request:
 Vegetarian Vegan Gluten-Free

Member ID # _____
 Member of APLG Member of FSA First time attendee
 Name: _____
 First Middle Last

Name for Badge: _____

C. 3rd Registration

Registration includes: 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.

3rd Registration, on or before January 6, 2020 \$325
 3rd Registration, after January 6, 2020 \$375

Total Panel C \$ _____

Special Meal Request:
 Vegetarian Vegan Gluten-Free

Member ID # _____
 Member of APLG Member of FSA First time attendee
 Name: _____
 First Middle Last

Name for Badge: _____

Payment

A. Primary Registration	\$ _____
B. 2nd Registration	\$ _____
C. 3rd Registration	\$ _____
D. Guest Ticket(s)	\$ _____
TOTAL	\$ _____

D. Guest Tickets (optional for non-meeting attendees only)

Paid guest attendees are welcome to bring a guest to the following social/meal functions for an additional fee.

Guest of:	Primary	2nd	3rd	
Friday Lunch, \$55	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____
Friday Reception, \$40	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____
Saturday Breakfast, \$40	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____
Saturday Lunch, \$55	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____

Total Panel D \$ _____

Special Meal Request
Guest of: **Primary** **2nd** **3rd**
 Vegetarian
 Vegan
 Gluten-Free

Check (payable to: American Accounting Association)
 AMEX MasterCard VISA
 Card Number _____
 Exp. Date _____ CVV Code (on back of card): _____
 Name on card: _____
 Billing Address: Same as mailing address above

 City: _____ State/Province: _____
 Zip/Postal Code: _____ Country: _____
 Signature _____

Mail checks to: American Accounting Association
 9009 Town Center Parkway, Lakewood Ranch, 34202

Cancellation Policy: All cancellations must be received in writing at AAA in order to be processed (email info@aaahq.org). Cancellation requests received after January 6, 2020 will incur a \$75 cancellation fee. No refunds will be given for cancellations received after January 27, 2020 or for no-shows. **20APLG02**