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28th Annual 2009 STFM: Northeast Region Conference
Hilton Rye Town Hotel • Rye Brook, New York • October 30 – Nov. 1, 2009

FACULTY \*\* RESIDENT \*\* FELLOW
CONFERENCE REGISTRATION FORM

Attendee Name: \_\_\_\_\_ Degree(s) \_\_\_\_\_

Institution Name: \_\_\_\_\_

Dept Name: \_\_\_\_\_

Institution responsible for payment, if different from above: \_\_\_\_\_

Billing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax : \_\_\_\_\_

Email \_\_\_\_\_@\_\_\_\_\_

Vegetarian Meal: \_\_\_ Yes \_\_\_ No (Deadline is Oct. 15th )

Meal Plan – I would like information about the Family/Guest Meal Plan.

CONFERENCE REGISTRATION FEE :

To qualify for the early registration fee, registrations must be received by October 1, 2009. After October 1, the following fees apply to registrations received in the office or at the conference site:

By October 1, 2009:

- FMEC Member \$395.00
Non FMEC member \$420.00
Residents/Fellows \$250.00
This Resident/Fellow is covered under our Residency Fair payment. (Please submit a copy of your Residency Fair registration with this form.)

After October 1, 2009:

- FMEC Member \$420.00
Non-FMEC Member \$445.00
Residents/Fellows \$275.00

Fee Calculation

Total Amount Enclosed \$ \_\_\_\_\_

\$ \_\_\_\_\_

PAYMENT

Check enclosed (payable to FMEC/Long & Associates, Inc., P.O. Box 117 West Milton, OH 45383-0117)

Credit Card I hereby authorize use of my: Discover Visa MasterCard American Express

Card # \_\_\_\_\_ Signature \_\_\_\_\_ Expiration Date \_\_\_\_\_ Sec. Code# \_\_\_\_\_

Mail or Fax all completed registration forms or any notification of cancellation to: FMEC/Long & Associates, Inc., P.O. Box 117, West Milton OH 45383-0117 or Fax to: (937) 698-6153 Telephone: (937) 698-4188 Email: dschwan@longmgt.com ATTN: Ms. Deb Schwan RE: 2009 STFM:NE Region Meeting

REFUND POLICY: Written notification of cancellation must be received by October 1, 2009, to obtain a partial refund. (\$50.00 administrative fee is retained).

No conference registration refunds made after October 1, 2009. Other questions? Please call Laurence Bauer, MSW/MEd, Chair Planning Committee (937) 428-7866 or Email: laurence.bauer@sbcglobal.net All conference registrations must be received by October 10, 2009. After that date you must register at the conference site. (Rev. 03/22/09)