



American Institute of Floral Designers
AIFD Laureate Application

Full Name:

Primary Mailing Address:

In order to be considered for Laureate status you must have attended at least ten (10) AIFD Symposia. Please list 10 years of Symposia that you have attended:

- | | |
|----------|-----------|
| 1. _____ | 6. _____ |
| 2. _____ | 7. _____ |
| 3. _____ | 8. _____ |
| 4. _____ | 9. _____ |
| 5. _____ | 10. _____ |

I hereby attest that the information I have given regarding the attendance to the above mentioned AIFD National Symposia is truthful and accurate. I understand that if it is found that I have not attended the above mentioned National Symposia I will not qualify for the AIFD Laureate Status.

X _____

AIFD Member Signature

Please complete and return to:
AIFD
Attention: Laureate Application
720 Light Street
Baltimore, MD 21230
Fax: 410-752-8295
aifd@assnhqtrs.com