

2016 IFCA INTERNATIONAL ANNUAL CONVENTION E-REGISTRATION
Crowne Plaza Springfield
Springfield, Illinois
June 27 – July 1, 2016

AFTER SUBMITTING THIS FORM **USE THIS LINK TO SUBMIT PAYMENT OF AMOUNT DUE**
WWW.IFCA.ORG/CONV16REG. REGISTRATION IS NOT COMPLETE UNTIL PAYMENT IS MADE

Name _____
(Last) (First) (Title)

Name _____
(Last) (First) (Title)

Address _____

City _____ State _____ Zip _____ Phone _____

Please check if this is your first IFCA Convention that you have attended.

Child Registration – (Infant to age 12)

Name _____ Age _____ Name _____ Age _____

Name _____ Age _____ Name _____ Age _____

(Children 13 and older should attend the IFCA Youth Convention or pay the adult registration fee.)

ADULT REGISTRATION FEES

Weekly Registration (5 days)

Number of Adults (on or before June 1st) _____ x \$75 = \$ _____

Number of Adults (after June 1st - \$90) _____ x \$90 = \$ _____

OR

Daily Registration

Number of Adults (per day per adult) _____ x \$26 = \$ _____

CHILD REGISTRATION (Infant - age 12; for childcare costs)

Number of Children (on or before June 1st) _____ x \$35 = \$ _____

Number of Children (after June 1st - \$45) _____ x \$45 = \$ _____

WEEKLY MEAL TICKETS

Number of Adults _____ x \$ 105.00 = \$ _____

Number of Children (ages 3-12) _____ x \$ 70.00 = \$ _____

TOTAL AMOUNT DUE (Includes 5% e-service fee) \$ _____

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IMPORTANT NOTE: You must **CONTACT THE HOTEL TO MAKE YOUR CONVENTION ROOM RESEVATIONS.** This form is for IFCA Convention Registration and Meals only. Thank you.