|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **First Name:** |       | **MI:** |       | **Last Name:** |  |
|  |
| **Address:** |       | **City:** |       |
|  |
| **State:** |       | **Zip Code:**  |       | **E-Mail Address:** |       |
|  |
| **Phone:** |       | **Fax:** |       |
|  |
| **Agency:** |       | **Chapter:**  |       | **County:** |       |
|  |  |  |  |  |  |
| **First Time Attendee?** | **YES: [ ]**  | **NO: [ ]**  | **T-Shirt Size (XS – 6X)** |       |

**Registration: (Includes workshop sessions, reception, luncheon & access to exhibit hall)**

 **Postmarked by On-Site One-Day Total**

**August 2, 2019 (Workshops only)**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Member | [ ]  $175.00 |  | [ ]  $250.00 | [ ]  $100.00  |  |       |
| **Non-Member**  | [ ]  **$225.00** |  | [ ]  **$290.00** | [ ]  **$100.00**  |  |       |
| **Student (Includes workshop sessions, and exhibit hall access only)** | [ ]  **$35.00** |  | [ ]  **$35.00** |  |  |       |
| **Guest (Includes reception and access to exhibit hall only)** | [ ]  **$75.00** |  | [ ]  **$75.00** |  |  |       |

**Institute Events: (Cost *not included* in Registration fee)**

|  |  |  |  |
| --- | --- | --- | --- |
| **Golf Tournament:**  | **Monday, August 26, 2019 – 8:00 a.m.**  | [ ]  **$85.00/Member or $115/Corporate**  |       |
| **Pool Tournament:**  | **Monday, August 26, 2019 – 8:30 a.m.**  | [ ]  **$25.00**  |       |
| **Fun Run/Walk:** | **Tuesday, August 27, 2019 – 6:00 a.m.** | [ ]  **$ 7.00**  |       |
|  |  |  |  |

**Luncheon & Banquet:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Tuesday Lunch (non-registered attendee)** |  |  |       | **$45.00 (Tues.)** |       |
| **Banquet** |  |  |       | **$65.00 (Wed.)** |       |

|  |  |
| --- | --- |
|  ***TOTAL REGISTRATION FEE:***  |       |

**Payment Information: $50.00 Non-refundable after August 2, 2019**

|  |  |  |  |
| --- | --- | --- | --- |
| **Check:** | [ ] # |       | **Money Order:** [ ]  **(Please make payable to Florida Council on Crime & Delinquency)** |
| **Visa:** | [ ]  | **Master Card:** [ ]  | **American Express:** [ ]  | **Discover:** [ ]  |
|  |
| Card #:  |       | Expiration Date: |       | CSC#: |       |
|  |
| Name as it appears on credit card: |       | Billing Phone # of card: |       |
|  |  |
| Billing address of card: |       |
|  |
| **Signature:** |  | **Date:** |       |

**You may also register online at http://www.myfccd.org**