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Contact nysar3@gmail.com with invoice/purchase order requests.

**First Name: Last Name:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Title:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Organization:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Address:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**City: State: Zip:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Phone: Email:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Registration Fees**

NYSAR3, NYSASWM, or SWANA-NY Member, Day 1 & 2 ($100.00)

NYSAR3, NYSASWM, or SWANA-NY Member, Day 1 ONLY ($80.00)

NYSAR3, NYSASWM, or SWANA-NY Member, Day 2 ONLY ($40.00)

Non-Member, Day 1 & 2 ($140.00)

Non-Member, Day 1 ONLY ($120.00)

Non-Member, Day 2 ONLY ($80.00)

***Additional Registration Items***

NYSAR3, NYSASWM, or SWANA-NY Member, Day 2 Add-On Package (Lunch & Tour) ($20.00)

Non-Member, Day 2 Add-On Package (Lunch & Tour) ($35.00)

**Dietary Preference**

Make check payable to: **NYSAR3**

Email registration form to: [**nysar3@gmail.com**](mailto:nysar3@gmail.com)

Mail check and completed form to:   
**NYSAR3, 1971 Western Avenue #1180, Albany, NY 12203**

Vegetarian

Vegan

Gluten-Free

Lactose Intolerant