

# 2010 ALAG Regional Meeting

## REGISTRATION FORM

**Company Name** \_\_\_\_\_

**Contact Name** \_\_\_\_\_

**Mailing Address** \_\_\_\_\_

**City/State/Zip** \_\_\_\_\_

**Email** \_\_\_\_\_

**Phone** \_(\_\_\_\_\_)\_\_\_\_\_ **Fax** \_(\_\_\_\_\_)\_\_\_\_\_

\_\_\_\_ **Member Registration: \$15.00**

\_\_\_\_ **Non-Member Registration: \$25.00**

\*All registrations include lunch and 3 CEU credits.

### **Please check the meeting you plan to attend:**

\_\_\_\_ August 11, 2010 Valdosta, GA

\_\_\_\_ August 31, 2010 Rome, GA

\_\_\_\_ September 15, 2010 Statesboro, GA

\_\_\_\_ October 6, 2010 Atlanta, GA

\_\_\_\_ October 20, 2010 Gainesville, GA

### **PAYMENT INFORMATION:**

Amount of check enclosed \$\_\_\_\_\_.

To pay by credit card, contact our office to request a Pay Pal Invoice.

Date \_\_\_\_\_

Please enclose your check with this form to secure your choice. Please type or print information below and return to address below:

Assisted Living Association of Georgia

PO Box 3364

Gainesville, GA 30503

P: 678.943.2617

F: 678.262.9951

Email: [tiffanyneff@earthlink.net](mailto:tiffanyneff@earthlink.net)



Website: [www.alag.org](http://www.alag.org)