

**AAPFCO REGISTRATION**  
**2016 Annual Meeting**  
**FEIN 52-0854569**  
**August 3-6, 2016**  
**Pittsburgh Marriott Center**  
**Pittsburgh, PA**

Treasurer Use Only	
Date Rcd _____	\$ _____
CC _____	CK _____
NPC _____	QB _____
SR _____	EM _____
PDX _____	

**Hotel Information:** <http://www.marriott.com/hotels/travel/pitdt-pittsburgh-marriott-city-center/>

**Reservation Code:** American Control Officials Annual meeting **(Block closes July 9, 2016)**

**Online Room Reservations:** Block Name: AAPFCO Annual Meeting

**Web address for reservations:** [Book online here](#)

**Reservations Toll-Free:** 1-888-456-6600 or 1-877-645-3553

**Rate:** Single - \$130.00 + tax

**Address:** 112 Washington Street, Pittsburgh, PA 15219-3458

**Main Hotel Telephone Number:** 412-471-4000; Fax: 412-394-1017

**Registration Fee** .....\$325.00

**Guest Banquet Ticket** .....\$60.00

**AAPFCO Life Member** ..... No Charge

**Registration Fee + late registration (After July 9, 2016)** .....\$375.00

*Requests for full refund of registration fee honored if received by July 10; 50% after July 20, 2016. The late registration fee is non-refundable.*

**(Fax credit card registration to (501-219-1746) or mail registration with check to address below)**

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Affiliation:** \_\_\_\_\_

**Affiliation Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**Telephone:** \_\_\_\_\_ **Fax:** \_\_\_\_\_

**E-mail:** \_\_\_\_\_ **Attend Wednesday Reception:** Yes \_\_\_ No \_\_\_

**Remittance Information:** \_\_\_\_\_ **First Time Attendee:** Yes \_\_\_

**Payment by check:** \_\_\_\_\_ Make checks payable to: **AAPFCO**

**Payment by credit card:** VISA \_\_\_ MasterCard \_\_\_ (only credit cards accepted)

**Card Number:** \_\_\_\_\_ **Expiration Date:** \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

**Signature:** \_\_\_\_\_ **3-Digit Security Code:** \_\_\_\_\_

**Print Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

*(Name and address must be exactly as billing name and address on credit card)*

<p><b>Mail to:</b>  <b>AAPFCO</b>  <b>Jamey Johnson, Treasurer</b>  <b>Arkansas State Plant Board</b>  <b>1 Natural Resources Drive</b>  <b>Little Rock, AR 72205</b></p>
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Print names of non-registrant guests:

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