

AAPFCO

ASSOCIATION OF AMERICAN PLANT FOOD CONTROL OFFICIALS

REGISTRATION FORM

30th Fertilizer Administrators' Seminar

September 26-28, 2017

Residence Inn Downtown Portland

Portland, Maine

FEIN #52-0854569

(Complete form and mail or fax as shown below)

Name: _____

Company/Organization Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number w/Area code: _____ E-mail: _____

Registration Fee: \$175.00

Registration Deadline: **September 11, 2017**

Payment Method: _____ Check (Make checks payable to "AAPFCO")

_____ Credit Card (Credit cards for scholarship applicants will not be processed until all scholarships have been awarded.)

Credit Card Payment: _____ VISA _____ MasterCard (Only credit cards accepted)

Credit Card Number: _____ Security # _____ Exp. Date: ____/____

Signature: _____

Name on Credit Card: _____

Credit Card Billing Address: _____

City: _____ State: _____ Zip Code: _____

(NOTE: Name and address must be exactly as it appears on credit card)

Mail to: **Oklahoma Department of Agriculture, Food and Forestry**

Attn: Lance Kunneman

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