



**2018 ANNUAL MEETING
REGISTRATION AND DUES**
Sheraton New Orleans Hotel – New Orleans, LA
17-19 January 2018

Name: _____ State: _____

Badge Name: _____

Association/Company: _____

Title: () Executive Director () Association Officer () Insurance Administrator

() Association Staff () Sponsor () Corporate Member

Email: _____

Mailing Address: _____

Street

City

State

Zip

Phone: Business _____ Cell _____

Sponsor/Guest Name: _____

NGEDA ANNUAL MEMBERSHIP FEES

The Annual Membership Fee must be paid to register for the Conference

State Association (have free individual memberships) _____ **\$200** _____

Names: _____

Additional Individual Memberships (@ \$30 each) _____ **\$30** _____

Associate Memberships (@ \$30 each) _____ **\$30** _____

Corporate Membership/Sponsor (two free individual memberships) _____ **\$200** _____

Names: _____

Additional Corporate Memberships _____ **\$400** _____

Names: _____

CONFERENCE REGISTRATION

Member Registration _____ **\$100 each** _____

Guest Registration _____ **\$50 each** _____

Corporate Member/Sponsor Registration _____ **\$100 each** _____

TOTAL _____

Deadline for Pre-registration is 15 December 2017

*Please make check payable to NGEDA
Mail with payment to:
NGEDA, 625 SE Airport Road, Tampa, FL 33609*