



Registration Information

- Please do not **mail** registrations and payments after April 19. You may continue to send registrations with credit card payments electronically until 5:00 p.m. Wednesday, May 2, 2013.
- Refund requests must be received in writing no later than March 29, 2013 and a processing fee of \$50 per registration will be applied to all refunds.
- **No registrations accepted without payment. No Purchase Orders accepted.**
- **To avoid duplicate credit card charges, do not fax and mail.**

Registration Fees:

Training Only	(May 5-8)	Early \$135 if postmarked by March 8	Late \$155 if postmarked after March 8
Conference Only	(May 8-10)	Early \$200 if postmarked by March 8	Late \$230 if postmarked after March 8
Training and Conference	(May 5-10)	Early \$225 if postmarked by March 8	Late \$265 if postmarked after March 8

Send to: Governor's Hurricane Conference®

PO Box 279

Tarpon Springs, FL 34688-0279

Phone: 727-944-2724 or 800-544-5678

Fax: 727-944-2687

Email: ghcrene@verizon.net or ghclynn@verizon.net



2013 Governor's Hurricane Conference® Registration Form

(PLEASE DUPLICATE FOR MULTIPLE REGISTRATIONS – PRINT OR TYPE – DO NOT ENLARGE OR REDUCE THIS FORM – DO NOT STAPLE)

NAME _____ NICKNAME _____

(to be printed on name badge)

AGENCY _____ COUNTY _____

ADDRESS _____ CITY _____

STATE _____ ZIP _____ PHONE () _____ FAX () _____

EMAIL _____

_____ check here if you do not want your email address released

<input type="checkbox"/> Training Only	(May 5-8)	Early \$135 if postmarked by March 8	Late \$155 if postmarked after March 8
<input type="checkbox"/> Conference Only	(May 8-10)	Early \$200 if postmarked by March 8	Late \$230 if postmarked after March 8
<input type="checkbox"/> Training and Conference	(May 5-10)	Early \$225 if postmarked by March 8	Late \$265 if postmarked after March 8

Check enclosed made payable to: Governor's Hurricane Conference

Mail to: Governor's Hurricane Conference®, PO Box 279, Tarpon Springs, FL 34688-0279

phone: 727-944-2724 or 800-544-5678

CREDIT CARD REGISTRATION: American Express * MasterCard * Visa * Discover

Account number _____ Exp. date _____

Required: security code _____

Complete billing address if different than above _____

Print name as it appears on card _____

Signature required: _____ \$ _____ total authorized for this registration

(We cannot process your registration without a signature and an amount authorized.)

Credit card registrations may be mailed or faxed (727-944-2687). Refund requests must be received in writing no later than March 29, 2013. A \$50 per registration processing fee will be applied to all refunds.

Office Use Only:

