



Chuck Loring Workshop
April 27, 2018
8:00 am – 3:00 pm
Northern Trust • 755 Beachland Blvd

Registration Form

Check One:

- Non-Group Rate (1 or two attendees) \$80 each
 Group Rate (3+ Attendees) \$72 each

Organization Name: _____

Address: _____

City/St/Zip: _____

Phone: _____ Contact Email: _____

Registration Name	Organizational Role
1)	
2)	
3)	
4)	
5)	
6)	
7)	
8)	

Amount enclosed: \$ _____ (\$80 each for 1 or 2 -or- \$72 each groups of 3 or more)

Please mail this form, with your check payable to AFP Indian River to:

AFP Indian River
PO Box 1213
Vero Beach, FL 32961