**2016 IFSEA Conference Registration**

**April 9-12, 2016 ~ Orlando, FL**

**Wyndham Lake Buena Vista Resort**

**Walt Disney Resort  
1850 Hotel Plaza Boulevard**

**Lake Buena Vista, Florida 32830**

**Hotel Reservations: (407)828-4444**

**Contact IFSEA:** [**ifseahqoffice@gmail.com**](mailto:ifseahqoffice@gmail.com)

**800.893.5499**

**Register on-line @ ifseaconference.com or fill out below for mail-in payment:**

|  |  |
| --- | --- |
| **Name** |  |
| **Certification Designation** |  |
| **Email** |  |
| **Address** | **City: State: ZIP:** |
| **Phone** |  |
| **IFSEA Member** | **Branch:** |
| **Student Member** | **School:** |

**2016 IFSEA Conference Rates**

|  |  |  |  |
| --- | --- | --- | --- |
| **Packages** | **Price** | **Quantity** | **Total** |
| **IFSEA Member** | **$525.00** |  |  |
| **Non-IFSEA Member** | **$595.00** |  |  |
| **IFSEA Student** | **$475.00** |  |  |
| **Retired Member** | **$475.00** |  |  |
| **IFSEA Military Member** | **$475.00** |  |  |

***\*Packages include (1) Opening Reception, (3) Breakfasts, (2) Luncheons,***

***(1) Social Dinner & (1) Chairman’s Dinner & Student Ball.***

***All Education Classes and the 9th Annual IFSEA Culinary Challenge Included!***

|  |  |  |  |
| --- | --- | --- | --- |
| **Single Tickets** | **Price** | **Quantity** | **Total** |
| **Thursday Opening Reception** | **$75.00** |  |  |
| **Saturday Night Celebration Dinner** | **$200.00** |  |  |

**Total Amount: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**PAYMENT INFORMATION**

**Please print clearly**

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

**Signature** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Credit Card Payment: #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Exp date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Name as Appears on Card:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Billing Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_City:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_State\_\_\_\_Zip\_\_\_\_\_\_\_\_**

**Instructions:**

Please COMPLETE AND SCAN/EMAIL TO:

[**ifseahqoffice@gmail.com**](mailto:ifseahqoffice@gmail.com)

**or Fax to 303.420.9579**

**Instructions for Check Payment**

Check #\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Mail Application and Check Payment to:**

IFSEA Headquarters

4955 Miller Street #107

Wheat Ridge, CO 80033