

2011 MIDWEST REGIONAL FCM CONFERENCE REGISTRATION

Pre-Registration Deadline is October 3rd (Postmarked)

(Please print or type)

Name _____

Address _____

City _____

State and Zip _____

Phone # _____

FCM Membership # _____

Names of those attending: (**first and last name**)

Mail registrations to:

CHRIS BROWN

652 W Marshall St.

ARGOS, IN 46501

(For confirmation enclose a self-addressed stamped envelope)

SPECIAL NOTE: There is only one fee for the entire weekend. We do not have daily fees; there is not a separate fee for getting into the Dealer's Room.

FRIDAY NIGHT BUFFET (Catered by Golden Corral)

_____ Adults x \$10.00 each _____

_____ Children (ages 4 to 10) x \$7.00 each _____

_____ Children (under age 4) _____ **FREE**

CONFERENCE REGISTRATION:

# Attending	Conference Rate	FCM Member	Non-Member
	Adult	\$25	\$35
	Spouse	\$20	\$30
	Child (5 - 17)	\$10	\$15

All Registrations after Oct. 3rd: Add \$5.00 _____

TOTAL AMOUNT ENCLOSED: \$ _____

Make Checks Payable to FCM Midwest