

# 2019 CONVENTION ATTENDEE NAME BADGE & EVENT REGISTRATION FORM

Use this form for: Name Badge, Vendor Tables, Tours, Golf Tournament & Hole Sponsorship

Please print clearly all information as you would like it to appear on your name badge

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Company \_\_\_\_\_ Title \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

Email \_\_\_\_\_ Spouse/Guest Full Name \_\_\_\_\_

**Convention Registration Fees:** Note there will be a \$50 late registration fee for all registrations received after September 1st

**Refund Policy:** Registration cancellations will be accepted until September 4th by verbal or written request.

NDFA / NDSA / PAMD Member Registration \$235.00 \$ \_\_\_\_\_

Non-Member Registration \$335.00 \$ \_\_\_\_\_

Government / Academia / Student Registration \$ 50.00 \$ \_\_\_\_\_

Golf Tournament (Thursday afternoon)  
# of Players \_\_\_\_\_ X \$155.00 \$ \_\_\_\_\_

(includes lunch, please provide a list of additional player names on page 2 of this form)

Golf Tournament Hole Sponsor \$100.00 \$ \_\_\_\_\_

Vendor Display Table \$100.00 \$ \_\_\_\_\_

Baseball Hall of Fame SELF GUIDED Tour (Thursday afternoon) \$ 0.00

Spouse/Guest attending

Fenimore Art Museum SELF GUIDED Tour (Thursday afternoon) \$ 0.00

Spouse/Guest attending

## Wednesday Night Welcome Cocktail Party and Dinner

Attending and staying at The Otesaga Resort Hotel – included in hotel room rate \$ 0.00

Attending but not staying at The Otesaga Resort Hotel – Charge is \$85 per person \$ \_\_\_\_\_

Not attending \$ 0.00

## Thursday Night Banquet Cocktail Party and Dinner

Attending and staying at The Otesaga Resort Hotel – included in hotel room rate \$ 0.00

Attending but not staying at The Otesaga Resort Hotel – Charge is \$85 per person \$ \_\_\_\_\_

Not attending \$ 0.00

**Payment Total \$** \_\_\_\_\_

**Payment:** Payment must be enclosed with registration form. Checks should be made payable to *Northeast Dairy Foods Assoc. Inc.*

CC Number \_\_\_\_\_ Exp. Date \_\_\_\_\_ CVV Code \_\_\_\_\_

**Credit Card Billing Address** (if different from above) \_\_\_\_\_

## Email / Mail / Fax by September 17<sup>th</sup> to:

Northeast Dairy Foods Association, Inc. 427 South Main Street, N. Syracuse, NY 13212

Phone: 315-452-6455 Fax: 315-452-1643 Email: [info@nedairyfoods.org](mailto:info@nedairyfoods.org) Website: [www.nedairyfoods.org](http://www.nedairyfoods.org)

Pennsylvania Association of Milk Dealers 240 N Third Street, Suite 406, Harrisburg, PA 17101

Phone: 717-238-1738 Fax: 717-238-1593 Email: [piercepamd@aol.com](mailto:piercepamd@aol.com)

# Northeast Dairy Convention Golf Tournament Team Registration Form

Thursday, September 12th Otesaga Golf Course

Use this side to add names of players on your team. Singles, twosomes and threesomes are welcome.

You do not need a complete foursome, we'll supplement if necessary. Single players will be assigned to a foursome.

**Team Names – List players you wish to be paired with and/or will be paying for (you do not need to include yourself here).**

Name \_\_\_\_\_ Company \_\_\_\_\_ Handicap \_\_\_\_\_  
 I am paying for     to be paid by self

Name \_\_\_\_\_ Company \_\_\_\_\_ Handicap \_\_\_\_\_  
 I am paying for     to be paid by self

Name \_\_\_\_\_ Company \_\_\_\_\_ Handicap \_\_\_\_\_  
 I am paying for     to be paid by self

Thank you!

**Ozzie Orsillo, Golf Tournament Chair**