***Florida Redevelopment Association October 12-14, 2016 Hilton Orlando I-Drive***

*Please download and send in this registration form, as it is required to ensure space. The form is posted at* [*www.redevelopment.net*/annualconference/2016](http://www.redevelopment.net/annualconference/2016)*.* Please send in a completed form for each registrant with all fees payable to **FRA Annual Conference**, P.O. Box 1757, Tallahassee, Florida, 32302-1757. Visa or MasterCard payments may be faxed to Melanie Howe at (850) 222-3806 or emailed to *mhowe@flcities.com.* ***Member rates are available only to paid members as of registration date.*** All advance registrations must be received by October 3, 2016**.** Cancellations in writing by close of business by that date may receive a refund less a $50 processing fee.

*CONTINUE TO CHECK PROGRAM FOR DETAILS* [*www.redevelopment.net*](http://www.redevelopment.net/)

Full Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Nickname: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Business/Agency \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**(If paying by credit card below, please use card billing address)**

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Guest Name (if purchasing):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Nickname: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# Please submit payment with each registration

 Check (Payable to **FRA Annual Conference**)  Visa  MasterCard

Credit Card Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Exp. Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Card Holder’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Billing Address (if different from above) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| --- | --- | --- | --- |
| **Registration Type** | **Member \*** | **Non -**  **Member** | **Sub-**  **totals** |
| Full Registration\*\* | $ 395 | $ 480 |  |
| Wednesday Only\*\*\* | $ 325 | $ 350 |  |
| Thursday Only\*\*\* | $ 345 | $ 375 |  |
| Guest/Spouse\*\* | $ 315 | $ 345 |  |
| **CRA BD**  **Training\*\*\*\***  ***WEDS OCT 12***  ***8 a.m. – 11 a.m.*** | $ 25 | $ 25 |  |

**\* Members:** FRA dues must be paid by October 7, 2014 to receive the member discount in advance.

**\*\*** **Full and Guest registrations** include all workshops and meal functions. **Guests** are spouses, partners or non-professional relations. Guest registration may not be used for staff or company representatives.

**\*\*\*One-day registration** includes workshops and meal functions scheduled for that day only.

\*\*\*\***Mobile tours and CRA Basics** registrations are not included in general registration, see additional fee.

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Fulltime Students** |  |  | Comp see notes |  |  |  | Comp see notes |  |
|  |  |  |
| **Mobile Tours**\*\*\*\* ***WEDS OCT 12***  ***8:00 am - 11:00 am***    **Tour TBA**    **Tour TBA**  *(Space available basis)*  **GRAND TOTAL** | | | $40 ea    $40 ea | |  |  | $\_\_\_\_\_\_\_\_\_\_\_    $\_\_\_\_\_\_\_\_\_\_\_    $\_\_\_\_\_\_\_\_\_\_\_ | | |

**Extra Tickets:** to order additional tickets for meal functions, please download the form on bottom of the main conference page called **Extra Tickets form**.

**Student Registration applies to full time university students and** excludes meal function access but includes access to all workshops.

***Special Needs:*** *If you have special physical needs, or a dietary preference, please let us know on the registration form. Thanks!*