

131ST NGAUS GENERAL CONFERENCE AND EXHIBITION
11-13 SEPTEMBER 2009, NASHVILLE, TN

REGISTRATION CATEGORIES (Please check applicable category):

Shirt Size: Self _____ Guest _____ (S,M,L,XL,XXL)

Full Conference Registrant (\$165)

Delegate Retiree
(check if applicable)

Rank (if applicable), Last Name, First Name, MI

(Badge Name)

E-mail _____ NGAUS ID (membership)# _____

- Company Grade/Warrant Officer Mixer – 10 Sep Governor's Reception – 11 Sep
 Spouse Luncheon – 12 Sep States Dinner – 13 Sep Officer Professional Development
(Please check events included in the registration fee that you will be attending)

Spouse/Guest Full Conference Registrant (\$165)

- Company Grade/Warrant Officer Mixer – 10 Sep Governor's Reception – 11 Sep
 Spouse Luncheon – 12 Sep States Dinner – 13 Sep Officer Professional Development
(Please check events included in the registration fee that you will be attending)

Rank (if applicable), Last Name, First Name, MI

(Badge Name)

(Please check events included in the registration fee that your spouse/guest will be attending)

Additional Ticketed Events (please check applicable categories):

Full Conference Registrant:

NGAUS Golf Tournament \$85.00 - 10 Sep

Fun Run \$20.00 - 11 Sep

Retirees' Luncheon - 12 Sep (Retired NGAUS Members \$5 – all others \$25.00) Retirees' Luncheon \$25.00

Spouse/Guest Full Conference Registrant:

NGAUS Golf Tournament \$85.00

Fun Run \$20.00 11 Sep

ACCOMODATIONS: Arrival Date _____ Departure Date _____

Hotel Name: _____ Deposit Required to secure room \$100

Special Requirements: _____

NOTE: WE MUST HAVE YOUR TRANSPORTATION INFORMATION AT REGISTRATION

Driving Yes or No

TRANSPORTATION: Airline _____ (Mil/Civ) _____ Flt# _____ Arr Date _____ Time _____
Airline _____ (Mil/Civ) _____ Flt# _____ Dep Date _____ Time _____

Other (Please provide details): _____

BUS TRANSPORTATION FROM/TO AIRPORT (Free) BNA Nashville Int'l ANR Airbase

Total Amount due for registration fees, additional ticketed events & hotel deposit \$ _____

Please make checks payable to: NGA, P.O. Box 663, North Little Rock, AR. 72115

Credit Card Information: Visa Mastercard American Express Discover

Credit Card Number _____ Exp. Date ____/____

If paying by Credit Card, you may fax your information to: 501-758-2097

REGISTRATIONS MUST BE RECEIVED NLT 3 AUGUST 2009