66th GENERAL CONFERENCE & EXHIBITION

**NATIONAL GUARD ASSOCIATION OF ARKANSAS**

**THE ARLINGTON RESORT, HOTEL, AND SPA HOT SPRINGS, AR**

**26-27 APRIL 2019**

# RANK\_\_\_\_\_\_\_\_\_\_\_\_ NAME\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ NAME TO APPEAR ON BADGE

## ADDRESS\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ YOURS\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**CITY\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_STATE\_\_\_\_\_\_\_ZIP\_\_\_\_\_\_\_\_\_\_**

**EMAIL ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**DAYTIME PHONE (\_\_\_\_\_\_\_\_) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ NAME TO APPEAR ON BADGE**

**GUEST NAME\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ GUEST\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**GUEST NAME\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ GUEST\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Any food allergies for you or your guest:**

(Registration includes Saturday evening Banquet) Please indicate if you will attend

I will attend the Banquet. How many? \_\_\_\_\_\_\_\_ President’s Reception, 26 APR 1900, How many\_\_\_\_

I will not attend the Banquet. \_\_\_\_\_\_\_  Past Presidents & Retiree Lunch, 27APR 1200 How many\_\_\_\_

* Optional Sunday morning devotional/prayer breakfast How many

### CONFERENCE REGISTRATION-$65 Per Person

REGISTRATION AMOUNT

PRE-REGISTRATION TOTAL $65.00 X # OF ATTENDEES $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**(ON SITE REGISTRATION $75)**

**OPTIONAL EVENTS (ADDITIONAL COSTS REQUIRED)**

**GOLF TOURNAMENT**

Please complete separate entry form and include payment for each event

#### REGISTRATION PAYMENT METHOD

**1**. IF PAYING BY **CHECK**, MAKE PAYABLE TO NGAA

MAIL TO: NGAA, P.O. BOX 663, NO LITTLE ROCK, AR 72115

**2.**  IF PAYING BY **CREDIT CARD,** COMPLETE THE FOLLOWING AND

MAIL TO: **NGAA, P.O. BOX 663, NO LITTLE ROCK, AR 72115**

Note: **There is a 3.5-4% processing fee for credit card payments**

NAME ON CARD\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CARD TYPE: (\_\_\_\_\_\_) VISA (\_\_\_\_\_\_) MASTERCARD (\_\_\_\_\_\_) AMERICAN EXPRESS (\_\_\_\_\_\_) DISCOVER

CARD NUMBER\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_CVV\_\_\_\_\_\_\_\_\_\_\_\_EXP DATE \_\_\_\_\_\_/\_\_\_\_\_

SIGNATURE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_AMOUNT: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**MAKE HOTEL RESERVATIONS WITH THE ARLINGTON HOTEL (501) 623-7771 (ask for NGAA Conference rate)**

**GROUP ROOM RATE $104.00 – Single room $114.00 -Double room PLUS TAX**

**ROOM RESERVATIONS MUST BE MADE BY 5 APRIL 2019**

**NO REFUNDS AFTER 1 APRIL 2019**

***REGISTER BY 15 APRIL 2019 TO GUARANTEE RESERVED SEATING AT BANQUET***