

SPRING SEMINAR 201& Registration

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The cost of the seminar is \$75. To reserve your seat for this year's seminar email your completed form to events@asmc-cleveland.org by Wednesday, March 14, 2012.

Payment information can be found at <http://asmc-cleveland.org/events/conferences>.

First Name (As to be displayed on nametag)

Last Name

OPTIONIAL: What certifications do you hold? (Choose all that apply).

☐

CAP

☐

CFM

☐

CISA

☐

CDFM

☐

CGFM

☐

CMA

☐

CFE

☐

CIA

☐

CPA

Employer

Address 1:

Address 2:

City

State:

**Zip/ Postal
Code:**

Work Phone:

Fax:

Email:

Which organization(s) are you a member of: (Choose all that apply)

☐

AGA

☐

ASMC

Will a sign language interpreter be needed?

☐

Yes

☐

No

Each lunch entrée includes: Chef's seasonal vegetables and starch, dessert, fresh, baked breads, coffee and herbal tea service.

Please Indicate your entrée choice:

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Chicken Marsala

☐

Honey Glazed Salmon

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Vegetarian Pasta