



**BOSTON, MA | BOSTON CONVENTION AND EXHIBITION CENTER | OCTOBER 20-23, 2019**

Please complete and fax credit card payment to: +1.301.907.2864. Or, mail check payment to: AFP, P.O. Box 64714, Baltimore, Maryland 21264

**1 REGISTRATION INFORMATION** Please type or print.

Mr.    Ms.    Mrs.    Dr.   AFP Member # \_\_\_\_\_

Full Name \_\_\_\_\_  
FIRST                      MIDDLE INITIAL                      LAST                      SUFFIX

Title \_\_\_\_\_

Company \_\_\_\_\_

Are you a:    Team Registrant

Home OR  Business

Address \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_

Zip/Postal Code \_\_\_\_\_ Country \_\_\_\_\_

Phone \_\_\_\_\_

E-mail \_\_\_\_\_

Preferred first name for badge \_\_\_\_\_

**2 CUSTOMIZE YOUR CONFERENCE EXPERIENCE**

**Member    Non-Member (See 4)**

Substitution for \_\_\_\_\_     \$100                       \$495

**3 METHOD OF PAYMENT**

TOTAL AMOUNT DUE    \$ \_\_\_\_\_

*All payments must be made in U.S. Dollars drawn on a U.S. Bank. Federal Tax ID 58-1424769*

Check    American Express    Discover Card    MasterCard    Visa

Credit Card #: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Print Cardholder Name: \_\_\_\_\_

Signature: \_\_\_\_\_

**4 NON-MEMBERS JOIN AFP FOR NO EXTRA CHARGE**

Your non-member application grants you full AFP membership. Upon submitting your application, you will become enrolled as an AFP member at no additional charge. New memberships are 12-months in duration based upon the month in which you join. For example, individuals whose AFP membership begins in April will have an expiration date of March 31 the following year. Annual dues (\$495) may be deductible as a business expense but are not deductible as a charitable contribution. Of the \$495 in annual membership dues, \$45 is applied toward a one-year subscription to AFP Exchange, which is inseparable from dues and disclosed per USPS regulations.

**5 GENERAL INFORMATION**

Please indicate your...

**1. Relationship to finance** (Check one)

- Practitioner - I perform/manage finance functions.
- Associate - I sell to finance/treasury departments, or I perform consulting.
- Academic - I teach finance full-time.

**2. Job level** (Check one)

- Non-Financial Executive Level - CEO, CIO, COO, President, Chair, Chief
- Financial Executive Level - CFO, Financial Controller, Treasurer
- Senior Management - Assistant Treasurer, Assistant Controller
- Management Level - Director of Finance, Treasury, Risk, Other
- Staff Level - Analyst, Manager, Accountant, Cash Manager
- VP Level - VP of Treasury, Finance, Risk, Other

**3. Organization's industry** (Check one)

<input type="checkbox"/> Banking	<input type="checkbox"/> Health Services
<input type="checkbox"/> Business Svcs./ Consulting/Legal	<input type="checkbox"/> Hospitality/Travel/ Transportation
<input type="checkbox"/> Comm./Media/ Info. Provider	<input type="checkbox"/> Information Technology
<input type="checkbox"/> Education	<input type="checkbox"/> Insurance
<input type="checkbox"/> Energy/Utility/ Petroleum	<input type="checkbox"/> Manufacturing
<input type="checkbox"/> Financial Services	<input type="checkbox"/> Non-profit
<input type="checkbox"/> Government	<input type="checkbox"/> Other
	<input type="checkbox"/> Retail/Wholesale/ Distribution

**4. Organization's annual revenue** (Check one)

<input type="checkbox"/> Under \$10 million	<input type="checkbox"/> \$1-4.9 Billion
<input type="checkbox"/> \$10-99.9 million	<input type="checkbox"/> \$5-9.9 Billion
<input type="checkbox"/> \$100-249.9 million	<input type="checkbox"/> \$10-20 Billion
<input type="checkbox"/> \$250-499.9 million	<input type="checkbox"/> Over \$20 Billion
<input type="checkbox"/> \$500-999.9 million	

**5. Gender:**    Male    Female

**6. Date of Birth (MM/DD/YYYY):**   \_\_\_\_/\_\_\_\_/\_\_\_\_

**Registration Policies** The official Conference badge and badgeholder MUST be worn at all times for admission. Please be advised that Conference attendees may be asked to present photo identification in addition to their name badge for admission. Your name badge represents an admission contract between you and AFP. Switching or transferring badges is a violation of this contract and will subject the badge to confiscation. We thank you for your cooperation.

**Photography Disclosure** Upon registering for the conference, you are providing AFP the irrevocable right to use your likeness for AFP advertising, trade and promotion. For a complete photo policy.

**Special Assistance** If you have a disability and require special assistance and/or have medical or religious dietary restrictions, please specify your needs to customerservice@afponline.org at least one week before the event so that we may accommodate your needs.