



AFFI-CON 2019 REGISTRATION FORM

Return completed form with check payment to: American Frozen Food Institute
PO Box 34861 | Alexandria, VA 22334
Credit Card Payment to: events@affi.com
One (1) attendee per registration

Attendee Name (First & Last Name)	Company Name	Title
Address	City	State/Zip
Phone	E-mail	Guest Full Name

Registration and Events/Session Questions

Are you planning to attend the Welcome Reception on Saturday, February 23rd?

Y N

Are you planning to attend the AFFI Annual Meeting and Industry Spotlight on Monday, February 25th?

Y N

Will you be making hotel reservations at the Manchester Grand Hyatt in San Diego, the official hotel of AFFI-CON 2019?

Y N

Are you interested in registering for the **Food Safety Conference**?

**see details & registration form on page 2*

Y N

What product(s) or service(s) do you buy at AFFI-CON?

What product(s) or service(s) do you sell at AFFI-CON?

Are you primarily attending AFFI-CON as a buyer, seller or broker?

Buyer Seller Broker

Check ONE (1) Company Classification:

- | | |
|---|---|
| <input type="checkbox"/> Broker | <input type="checkbox"/> Packaging |
| <input type="checkbox"/> Consultant | <input type="checkbox"/> Press |
| <input type="checkbox"/> Distributor | <input type="checkbox"/> Processor/Manufacturer |
| <input type="checkbox"/> Foodservice Operator | <input type="checkbox"/> Retailer |
| <input type="checkbox"/> Government | <input type="checkbox"/> Speaker |
| <input type="checkbox"/> Guest | <input type="checkbox"/> Trade Association |
| <input type="checkbox"/> Logistics | <input type="checkbox"/> Warehouse |

Registration Fees & Payment

AFFI Member

Early Bird: \$650 Regular: \$750 Late: \$850
10/5/18-11/30/18 12/1/18-2/8/19 2/9/19-2/26/19

AFFI Foodservice/Retail Member

Early Bird: \$250 Regular: \$350 Late: \$450
10/5/18-11/30/18 12/1/18-2/8/19 2/9/19-2/26/19

First Timer (first time attending an AFFI-CON. member or non-member)

Regular: \$650

Non-Member

Early Bird: \$1,250 Regular: \$1,500 Late: \$1,750
10/5/18-11/30/18 12/1/18-2/8/19 2/9/19-2/26/19

GUEST (not an industry representative)

\$100

Credit card information

**Billing address must match with address linked to the card provided*

Visa MC AMEX

Name (as it appears on card)

C.C. Number Expiration Date

*Street Address Apt./Suite # City

State Zip Code Country

Signature



FOOD SAFETY LEADERSHIP CONFERENCE

DOUBLING DOWN ON LISTERIA PREVENTION

FEBRUARY 25-27, 2019 • SAN DIEGO
MANCHESTER GRAND HYATT

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Registration Fees

- Food Safety Conference (*I am only attending the Food Safety Conference*)
\$625
- FS Conference & Company @ AFFI-CON (*I am only attending the Food Safety Conference, but my colleagues are attending AFFI-CON 2019*)*
\$525
- FS Conference & AFFI-CON (*I am attending both AFFI-CON 2019 and the Food Safety Conference*)*
\$475

*Pre-registration to AFFI-CON 2019 is required

Workshops

Please indicate which workshop(s) you plan on attending. Fees apply

- Implementing an Effective LM Monitoring Program Workshop
\$100
- Listeria monocytogenes Modeling Workshop
\$100

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- Visa MC AMEX

Name (as it appears on card)	Card Number	Expiration Date
Address	City	State/Zip

Signature _____