



# Association for Federal Enterprise Risk Management

## Attendee Registration Form

### Attendee Information

**I'm attending (required answer selection)**

- In-Person**
- Virtually** (Home or Office)

Please note that in-person and virtual registration fees are the **SAME**. You will be billed according to your membership status in AFERM.

#### Name and Contact Info:

Full Name \_\_\_\_\_  
 Nickname/First Name for Badge \_\_\_\_\_  
 Professional Designations (check all that apply):  
 CGFM  CPA  Ph.D.  Other \_\_\_\_\_  
 Job Title \_\_\_\_\_  
 Organization \_\_\_\_\_  
 Mailing Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_  
 Phone \_\_\_\_\_  
 Email \_\_\_\_\_

This email address will be used for confirmations, updates, and badge pick-up instructions. Exhibitors and sponsors are permitted a one-time use of attendee email addresses for promotional purposes unless you check the box below. We will NOT sell your email address.

Check here if you do not want your email address sent to exhibitors.

**If Attending In-person**

**Please Indicate if you have any dietary restrictions:**

\_\_\_\_\_

**Please indicate if you require special accommodations:**

\_\_\_\_\_

**Please provide your emergency contact if any:**

Name \_\_\_\_\_

Phone \_\_\_\_\_

### Registration Fees

<b>Early Bird (by October 28)</b>	<b>AFERM Members:</b> <input type="checkbox"/> \$500.00	<b>Non-Members:</b> <input type="checkbox"/> \$625.00
<b>Standard (after October 28)</b>	<b>AFERM Members:</b> <input type="checkbox"/> \$600.00	<b>Non-Members:</b> <input type="checkbox"/> \$725.00

### Method of Payment

Total Amount Due: \$ \_\_\_\_\_  American Express  Discover  Master Card  VISA  PO/SF-182/Check\*  
\*PO/SF-182/Check # \_\_\_\_\_

Card Number \_\_\_\_\_ Expiration Date \_\_\_\_\_ Zip Code \_\_\_\_\_ Security Code \_\_\_\_\_

Card Holder Name \_\_\_\_\_ Card Holder Email \_\_\_\_\_

Card Holder Signature \_\_\_\_\_ Card Holder Phone \_\_\_\_\_

**Cancellation, Substitution & Refund Policy:** Please visit the AFERM 2023 Summit Registration Website for more information on deadlines and additional fees. Email: For Credit Cards & PO/SF-12, email this form to summit@aferm.org. By mail: All payment types. Mail completed registration form with payment to AFERM– 1050 Connecticut Ave, NW. P.O. Box 66281, Washington, D.C. 20035-6281.