

# Flowers and More in 2004!

TGOA / MGCA National Convention

June 24-26, 2004

Des Moines, Iowa

## OFFICIAL CONVENTION REGISTRATION FORM

**ATTENDEE ONE**, are you currently a:

\_\_\_\_\_ Member, since \_\_\_\_\_ (year)  
\_\_\_\_\_ Life \_\_\_\_\_ Member at Large  
\_\_\_\_\_ Spouse \_\_\_\_\_ Guest

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_

Email: \_\_\_\_\_

Name on Badge: \_\_\_\_\_

Club: \_\_\_\_\_

Please indicate your **current** club titles:

\_\_\_\_\_ National Officer  
\_\_\_\_\_ National Director  
\_\_\_\_\_ National Past President  
\_\_\_\_\_ National Committee Chair  
\_\_\_\_\_ National Committee Member  
\_\_\_\_\_ Regional Officer  
\_\_\_\_\_ Club Officer \_\_\_\_\_  
\_\_\_\_\_ Club Editor  
\_\_\_\_\_ Judge

**ATTENDEE TWO**, are you currently a:

\_\_\_\_\_ Member, since \_\_\_\_\_ (year)  
\_\_\_\_\_ Life \_\_\_\_\_ Member at Large  
\_\_\_\_\_ Spouse \_\_\_\_\_ Guest

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_

Email: \_\_\_\_\_

Name on Badge: \_\_\_\_\_

Club: \_\_\_\_\_

Please indicate your **current** club titles:

\_\_\_\_\_ National Officer  
\_\_\_\_\_ National Director  
\_\_\_\_\_ National Past President  
\_\_\_\_\_ National Committee Chair  
\_\_\_\_\_ National Committee Member  
\_\_\_\_\_ Regional Officer  
\_\_\_\_\_ Club Officer \_\_\_\_\_  
\_\_\_\_\_ Club Editor  
\_\_\_\_\_ Judge

## Early Bird Registration

**Deadline: May 15, 2004      2004 Convention fee: \$215.00 per person.**

**After May 16 : Late Registration fee is \$235.00.**

**After June 1: Cancellation fee will be \$50.00.**

Please keep a copy of your completed registration form for your records.

Number registering at this time: \_\_\_\_\_

Arrival date: \_\_\_\_\_ Time: \_\_\_\_\_

Number in your travel party: \_\_\_\_\_

Airline: \_\_\_\_\_ Flight # \_\_\_\_\_

Personal Car: \_\_\_\_\_ Amtrak: \_\_\_\_\_

(Look for our greeters, or hotel courtesy van.)

Special needs or handicaps:  
\_\_\_\_\_

Total Fee Enclosed: \$ \_\_\_\_\_

Make checks payable to: **MGC-DM**

Mail with this registration form to:

**Jerri Scott, Convention Chair**

**1431 Thompson Avenue**

**Des Moines, IA 50316-1623**

[jerriscott@aol.com](mailto:jerriscott@aol.com)

**515-262-0354**