



SAANYS ANNUAL CONFERENCE
SAGAMORE RESORT | LAKE GEORGE | OCT 20-21, 2019

CONFERENCE REGISTRATION

Name _____
First Last

Title _____

Email _____

Phone _____

Address _____

City _____ State _____ Zip _____

School Name _____

Event Options:

- Full Conference Registration – SAANYS Member \$395.00
- Full Conference Registration – Nonmember \$450.00
- One Day Only – Sunday \$225.00
- One Day Only – Monday \$225.00
- Presenter – full conference \$200.00
- Retiree – full conference \$295.00

TOTAL: _____

Method of Payment:

- Credit Card
- Check/Purchase Order
Payable to: SAANYS, 8 Airport Park Boulevard, Latham, NY 12110

_____ Card Number

_____ Exp. (Month/Year) CVC

_____ Cardholder Name (as it appears on card)

_____ Billing Address

_____ City State Zip

I hereby authorize SAANYS to charge by credit card for the total amount due.

_____ Signature

Please mail or fax this form to:

SAANYS
8 Airport Park Boulevard
Latham, NY 12110

Fax: 518-782-9552

An email confirmation of your registration will be sent to the address listed above.