

TWENTY -FOURTEEN  
*New Hampshire Grocers Association*  
 ANNUAL *Fall Conference*  
 AND EXPO

**Wednesday, October 22, 2014**

Executive Court Banquet Facility • Manchester, NH

# Registration Form



**NH Grocers Association**  
 110 Stark Street  
 Manchester, NH 03101  
 Tel: 603-669-9333  
 TF: 877-669-9333

## COMPANY INFORMATION

Please check all that apply:  Retailer  Supplier  Store Owner  Industry Guest

Company: \_\_\_\_\_ Tel: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Fax: \_\_\_\_\_

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

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

## BADGE AND REGISTRATION INFORMATION

Expo FREE to Retailers. Full Registration includes: Continental Breakfast, Morning & Afternoon Sessions, Luncheon and Drawing Entry.

| ATTENDEE(S): <i>Please print or type names. Print additional forms if necessary.</i> |   | FULL REG.<br>\$49 p.p. |
|--|---|------------------------|
| 1.   | <input type="checkbox"/> Retailer Expo Only |                        |
| 2.   | <input type="checkbox"/> Retailer Expo Only |                        |
| 3.   | <input type="checkbox"/> Retailer Expo Only |                        |
| 4.   | <input type="checkbox"/> Retailer Expo Only |                        |
| 5.   | <input type="checkbox"/> Retailer Expo Only |                        |
| 6.   | <input type="checkbox"/> Retailer Expo Only |                        |
| (# of Attendees _____ X \$49 each)   |   | <b>TOTAL \$</b>        |

## PAYMENT INFORMATION

**INVOICE ME:** *Members Only*

### ► By Check:

Make checks payable to NH Grocers Association Check # \_\_\_\_\_ Check Amt: \_\_\_\_\_

### ► By Credit Card: Visa Mastercard Discover American Express

Card #: \_\_\_\_\_

Exp. Date: \_\_\_\_\_ Zip Code: \_\_\_\_\_ CV2#: \_\_\_\_\_

Authorized Card User: \_\_\_\_\_

**Mail or Fax** your completed registration form to:

NH Grocers Association  
 110 Stark Street, Manchester, NH 03101  
 Fax: **603-623-1137**

**WWW.GROCERS.ORG**  
 To download forms or  
 for more info