

IN PERSON | WASHINGTON, DC | WALTER E. WASHINGTON CONVENTION CENTER | VIRTUAL

Please complete and fax credit card payment to: +1.301.907.2864. Or, mail check payment to: AFP, P.O. Box 64714, Baltimore, Maryland 21264

1 REGISTRATION INFORMATION Please type or print.

Mr. Ms. Mrs. Dr. AFP Member # _____

Full Name _____
FIRST MIDDLE INITIAL LAST SUFFIX

Title _____

Company _____

Are you a: Team Registrant

Home OR Business

Address _____

City _____ State/Province _____

Zip/Postal Code _____ Country _____

Phone _____

E-mail _____

Preferred first name for badge _____

2 CUSTOMIZE YOUR CONFERENCE EXPERIENCE

	Member	Non-Member (See 4)
AFP 2021 Washington, DC		
Substitution for _____	<input type="checkbox"/> \$0	<input type="checkbox"/> \$395
Deadline by October 8, 2021		
AFP 2021 Virtual		
Substitution for _____	<input type="checkbox"/> \$0	<input type="checkbox"/> \$200
Deadline by November 3, 2021		

3 METHOD OF PAYMENT

TOTAL AMOUNT DUE \$ _____

All payments must be made in U.S. Dollars drawn on a U.S. Bank. Federal Tax ID 58-1424769

Check American Express Discover Card MasterCard Visa

Credit Card #: _____ Exp. Date: _____

Print Cardholder Name: _____

Signature: _____

4 NON-MEMBERS JOIN AFP FOR NO EXTRA CHARGE

Your non-member application grants you full AFP membership. Upon submitting your application, you will become enrolled as an AFP member at no additional charge. New memberships are 12-months in duration based upon the month in which you join. For example, individuals whose AFP membership begins in April will have an expiration date of March 31 the following year.

5 GENERAL INFORMATION

Please indicate your...

- Relationship to finance** (Check one)
 - Practitioner - I perform/manage finance functions.
 - Associate - I sell to finance/treasury departments, or I perform consulting.
 - Academic - I teach finance full-time.
- Job level** (Check one)
 - Non-Financial Executive Level - CEO, CIO, COO, President, Chair, Chief
 - Financial Executive Level - CFO, Financial Controller, Treasurer
 - Senior Management - Assistant Treasurer, Assistant Controller
 - Management Level - Director of Finance, Treasury, Risk, Other
 - Staff Level - Analyst, Manager, Accountant, Cash Manager
 - VP Level - VP of Treasury, Finance, Risk, Other
- Organization's industry** (Check one)

<input type="checkbox"/> Banking	<input type="checkbox"/> Health Services
<input type="checkbox"/> Business Svcs./ Consulting/Legal	<input type="checkbox"/> Hospitality/Travel/ Transportation
<input type="checkbox"/> Comm./Media/ Info. Provider	<input type="checkbox"/> Information Technology
<input type="checkbox"/> Education	<input type="checkbox"/> Insurance
<input type="checkbox"/> Energy/Utility/ Petroleum	<input type="checkbox"/> Manufacturing
<input type="checkbox"/> Financial Services	<input type="checkbox"/> Non-profit
<input type="checkbox"/> Government	<input type="checkbox"/> Other
	<input type="checkbox"/> Retail/Wholesale/ Distribution
- Organization's annual revenue** (Check one)

<input type="checkbox"/> Under \$10 million	<input type="checkbox"/> \$1-4.9 Billion
<input type="checkbox"/> \$10-99.9 million	<input type="checkbox"/> \$5-9.9 Billion
<input type="checkbox"/> \$100-249.9 million	<input type="checkbox"/> \$10-20 Billion
<input type="checkbox"/> \$250-499.9 million	<input type="checkbox"/> Over \$20 Billion
<input type="checkbox"/> \$500-999.9 million	
- Gender:** Male Female
- Date of Birth (MM/DD/YYYY):** ____/____/____

Registration Policies The official Conference badge and badgeholder MUST be worn at all times for admission. Please be advised that Conference attendees may be asked to present photo identification in addition to their name badge for admission. Your name badge represents an admission contract between you and AFP. Switching or transferring badges is a violation of this contract and will subject the badge to confiscation. We thank you for your cooperation.

Photography Disclosure Upon registering for the conference, you are providing AFP the irrevocable right to use your likeness for AFP advertising, trade and promotion. For a complete photo policy.

Special Assistance If you have a disability and require special assistance and/or have medical or religious dietary restrictions, please specify your needs to customerservice@afponline.org at least one week before the event so that we may accommodate your needs.