

**PERSONAL INFORMATION**

(PLEASE PRINT. INFORMATION WITH AN\* WILL APPEAR ON YOUR BADGE)

First Name\* \_\_\_\_\_ Last Name\* \_\_\_\_\_

Job Position/Title\* \_\_\_\_\_

Name of Institution/Affiliation\* \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Address above is  Home  Work

Daytime phone \_\_\_\_\_ Fax \_\_\_\_\_ E-mail \_\_\_\_\_

**REGISTRATION FEES AND MEAL COUNT**

Please check each event you will be attending

Conference Registration

**FEES**

\$295.00 (Includes complimentary  
GAMG membership)

**MEALS (It is very important that you complete this section)**

I will attend the Progressive Dinner on Wednesday evening

I will attend the Breakfast on Thursday morning

I will attend the Auction Social on Thursday evening

I will attend the Thursday Lunch  I need a vegetarian meal

I will attend the Awards Luncheon  I need a vegetarian meal

I will have \_\_\_\_\_ guest(s) attending the Awards Luncheon  
(No charge for Award recipient) \$25.00 each person

Registration Fee \$ \_\_\_\_\_

Membership Fee \$ \_\_\_\_\_

Guest Fee \$ \_\_\_\_\_

Total Due \$ \_\_\_\_\_

**Payment Method:**

Cash – On-site

Check (Payable to Georgia Association of  
Museums and Galleries)

Paypal via [www.gamg.org](http://www.gamg.org)

**Registration Instructions**

This form is for the use of exhibitors and vendors registering to conduct business only.

Each registrant (including session presenters) must submit a registration form.

**Registration Rates**

The Vendor/Exhibitor registration rate is \$295.00 and must be received on or before December 30, 2018. Mail to GAMG, ATT: Michele Rodgers, P.O. Box 2133, Marietta, GA, 30061.

Spouses attending conference sessions must register. Spouses participating in the meal events are required to pay as follows. Lunch \$25.00, Dinner \$25.00, Awards Luncheon \$25.00