



**ANNUAL CONVENTION
SEPTEMBER 25 & 26, 2009
Hilton Long Island / Huntington**

Company Name Example Processes Serving Company

Address: 123 Main St. City: Example State: NY Zip: 11111

Telephone Number: (555) 123-4567 Fax Number: (555) 123-4568

E-Mail: example@example.com

Attendee First & Last name Please Print or Type	Full Registration \$ 200.00p/p*	Poker Tournament \$ 30.00p/p*	Saturday Night Banquet ONLY \$70.00 p/p*	Total
John Doe	200.00	30.00		230.00
Jane Doe			70.00	70.00
Jo Schmoe	200.00			200.00

Total Amount to be Placed on Payment Sheet: 500.00

***A Late Fee of \$25.00 p/p will be applied to Registration forms received after September 10, 2009.**

This includes on-site registration.

Cancellation policy

Any cancellation received within 7 days prior to the convention will receive a refund less a \$ 25.00 administration fee.

Any cancellation after that time will NOT be given a refund.

Enclose payment information on NYSPPSA Payment Sheet

If you wish to bring an additional guest to the Cocktail Reception there will be an additional charge at the door.