

**2010 PENSION SYMPOSIUM REGISTRATION FORM - FRIDAY, MARCH 26, 2010**

**Symposium "2010"**  
 3200 Squibb Avenue  
 Rolling Meadows, Illinois 60008

**(Please type or print)**

Municipality, District, or Firm: \_\_\_\_\_

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

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

Phone: \_\_\_\_\_

I.P.F.A. Members: \$ 55.00    Non - Members: \$ 75.00

Walk-In Registration: \$ 75.00

First Name:	Last Name:	Member	Non-Member
_____	_____	\$ _____.	\$ _____.
_____	_____	\$ _____.	\$ _____.
_____	_____	\$ _____.	\$ _____.
_____	_____	\$ _____.	\$ _____.
_____	_____	\$ _____.	\$ _____.
_____	_____	\$ _____.	\$ _____.
_____	_____	\$ _____.	\$ _____.
_____	_____	\$ _____.	\$ _____.

TOTAL CHECK ENCLOSED \$ \_\_\_\_\_.

**NOTE**

*New pension reform statutes require continuing education credits for all pension board members. You may be eligible to receive up to 5 hours of credit for this seminar.*

Payment must accompany this Registration form and be received in our office on or before March 23, 2010 to qualify for registration rates. **All** reservations received after March 23, 2010 will be charged walk-in fees. Requests for refunds must be received by March 24, 2010 for full fee refunds. No refunds of Symposium fees after this date. Please mail this form to: IPFA, 188 Industrial Dr. Ste. 438, Elmhurst, IL 60126.

**For Tax Reporting Purposes, our Federal I.D. Number is: 36-2650496.**

For I.P.F.A. Office Use:

Date: \_\_\_\_\_

Amount: \_\_\_\_\_

Check #: \_\_\_\_\_

Payee: \_\_\_\_\_

D/B: \_\_\_\_\_