

SOUTHEASTERN MEAT ASSOCIATION ANNUAL CONVENTION 2009
“OPENING NEW DOORS”
THE SHORES RESORT & SPA - DAYTONA BEACH SHORES, FL
June 12-13, 2009

PROCESSOR MEMBER REGISTRATION

COMPANY: _____

ADDRESS: _____
Mailing Address City State Zip

PHONE: _____ FAX: _____ e-mail _____

REGISTRATION FEE INCLUDES: Convention Program, Friday Lunch, Friday Monte Carlo Night (all proceeds go to the scholarship fund), Saturday Reception & Dinner.

Name & Title (Additional attendees list on back) **Non-members** add \$100.00 (& receive membership thru '09)

1. _____ Members \$ 250.00 X _____ = \$ _____
(# of person)

2. _____ (Attend Friday only \$175.00 or Saturday only \$140.00)

Spouse

1. _____ Spouse
Members \$ 140.00 X _____ = \$ _____
(# of persons)

2. _____

Children Please list child's age next to name

1. _____ Children 13 & up \$ 120.00 X _____ = \$ _____
(# of persons)

2. _____ Children 12 & under \$ 55.00 X _____ = \$ _____
(# of persons)

3. _____

Handicap _____ **GOLF** \$50.00 per person X _____ = \$ _____

TOTAL PAYMENT \$ _____

ATTENDING: (Enter number of persons attending)

Friday:

Spouse Luncheon _____
Business Lunch in Exhibit Area _____
Monte Carlo Night (Scholarship Fundraiser) _____

Saturday:

Networking Breakfast in Exhibit Area _____
(breakfast not included in spouse registration)
Awards Reception & Dinner _____

Please list any food allergies or special dietary needs, on the back of the registration form.

MAIL COMPLETED FORM AND PAYMENT BY MAY 15, 2009 TO:

SEMA: P.O. Box 620777; Oviedo, FL 32762
407.365.5661

REFUND POLICY: 60 Day Notice-Full Refund / 45 Day Notice-One-Half Refund / 30 Day Notice-None