



2021 DFW Philanthropy in Action Conference

June 3-4, 2021

VIRTUAL

Conference Registration

PLEASE PRINT CLEARLY (all bolded items required)

First Name: _____ **Last Name:** _____

Title: _____

Organization: _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Work Phone: _____ **Cell (optional):** _____

Email Address: _____

Years of Experience: 0-5 6-10 11 -15 15+

Are you a current AFP member? (Must check one): Yes No

Name of the AFP Chapter you belong to: _____

If no, would you like to receive AFP membership information? Yes No

Did you attend last year's conference? Yes No **Any past conferences?** Yes No

If registering as a group (three or more attendees from the same organization), please supply the following information for each additional attendee. Use a separate piece of paper if necessary:

BADGE #1

Name: _____

Title: _____

Email: _____

BADGE #3

Name: _____

Title: _____

Email: _____

BADGE #5

Name: _____

Title: _____

Email: _____

BADGE #2

Name: _____

Title: _____

Email: _____

BADGE #4

Name: _____

Title: _____

Email: _____

BADGE #6

Name: _____

Title: _____

Email: _____

		# of attendees		
Individual AFP Member Spring Break Rate	\$95 each	x _____	=	\$ _____
After April 15, 2021	\$120 each	x _____	=	\$ _____
Group AFP Member Early Bird Rate*	\$75 each	x _____	=	\$ _____
After April 15, 2021	\$100 each	x _____	=	\$ _____
Individual AFP Non-Member Spring Break Rate	\$125 each	x _____	=	\$ _____
After April 15, 2021	\$150 each	x _____	=	\$ _____
Group Non-Member Early Bird Rate*	\$100 each	x _____	=	\$ _____
After February 14, 2021	\$125 each	x _____	=	\$ _____
Student Spring Break Rate**	\$35 each	x _____	=	\$ _____
After April 15, 2021	\$50 each	x _____	=	\$ _____
	TOTAL			\$ _____

* Group registration rates require three or more attendees from the same organization. For *Group AFP Member* rate, at least one registrant must be a current AFP member. If none of the registrants from your organization is a current AFP member, please select the *Group Non-Member* rate.

**For full-time or part-time students currently enrolled in college, university, or post-secondary education.

PAYMENT

- Check enclosed (payable to **AFP Greater Dallas Chapter**)
- Visa / Mastercard / American Express / Discover

Card No.: _____ Exp Date: _____ CSC: _____

Name on Card: _____

Cardholder Signature: _____ Date: _____

Billing address of cardholder, if different than address above:

First Name: _____

Last Name: _____

Organization: _____

Address: _____

City: _____ State: _____ Zip: _____

Refund of conference registration fee, less an administrative fee of \$25, will be made if written notice of cancellation is received no later than May 10, 2021. Registrants whose cancellation requests are received after that date will NOT be entitled to a refund. Cancellation of registration for this event must be made in writing and mailed to the address below. Substitute attendees will be permitted (with appropriate documentation). Refunds will be processed after the conference.

***For your protection, if you are paying by credit card,
we recommend that you fax or mail your registration form.***

2021 AFP DFW Philanthropy in Action Conference

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