National Funeral Directors and Morticians Association, Inc.
2022 Annual Board of Directors and Administrative & Finance Meeting
Registration Form
Hilton Atlanta Airport Hotel ~ Atlanta, Georgia ~ October 22-25, 2022

Please use a separate registration form for each registrant.

Title Preference: (please circle one) Mr. Ms. Mrs. Dr. Reverend Minister Elder Bishop Attorney Other:_____

REGISTRANT: _____
(First) (M.I.) (Last) (Suffix)

COMPANY NAME: _____

MAILING ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIPCODE:** _____

OFFICE #: (___) _____ **FAX #:** (___) _____

PRIMARY EMAIL ADDRESS: _____ **CELL #:** (___) _____

EMERGENCY CONTACT NAME: _____

EMERGENCY CONTACT NUMBER: _____

Membership Information:

Are you a current Licensed National Member?____

Are you a current Student/Apprentice National Member? *(Please circle one)*

Affiliation:

What state (s) are you affiliated with?_____

Registrant Type and Fee: ***Registration Closes at MIDNIGHT on Friday, October 7, 2022***

☐ **Licensed Professional - $200.00** ***[non-member $250.00]***
☐ **Mortuary Student - $50.00**
☐ **Guest - $150.00**
☐ **Apprentice/ Intern - $100.00**

Additional Event Tickets:
If you have registered above, the welcome reception and luncheon are included in your registration. You may desire to order more.

☐ **Additional Welcome Reception: ___ x $50.00 = $_____**
☐ **Additional Luncheon:___ x $75.00 = $_____**

Payment Method: ***You may also register online at www.nfdma.com Last Day to Pre-Register is Friday , October 7, 2022***

☐**Check #**_____ ☐**Credit Card (type)** _____ **Credit Card #** _____

Signature_____ **Name as it appears on card**_____ **Exp. Date**_____

BILLING ADDRESS ASSOCIATED WITH CARD:

Registration Date
___/___/___

STREET #_____

CITY: _____**STATE:** _____**ZIPCODE:** _____

Amount Enclosed:

$ _____

Make payment payable to:
NFDMA, Inc. | 6290 Shannon Parkway | Union City, Georgia 30291
Phone: 770-969-0064 | Fax: 770-969-0505