



FICAP Convention Registration

July 17 – 21, 2019



Company: _____

Contact: _____

Phone: _____ Email: _____

Convention Registration Fee:

Registration by June 28th - \$ 450.00 x _____ = _____

Late Registration - \$ 550.00 x _____ = _____

The Registration Fee is per Member/Registrant and includes a spouse registration.

Please check the box for those events you and your spouse plan to attend, as this helps with planning and expenses.

Registrant: _____ ☐ Welcome Reception ☐ Keynote ☐ Calcutta ☐ Cornhole

Spouse: _____ ☐ Welcome Reception ☐ Keynote ☐ Calcutta ☐ Cornhole

Registrant: _____ ☐ Welcome Reception ☐ Keynote ☐ Calcutta ☐ Cornhole

Spouse: _____ ☐ Welcome Reception ☐ Keynote ☐ Calcutta ☐ Cornhole

Registrant: _____ ☐ Welcome Reception ☐ Keynote ☐ Calcutta ☐ Cornhole

Spouse: _____ ☐ Welcome Reception ☐ Keynote ☐ Calcutta ☐ Cornhole

+ **Fishing Tournament: (Thurs)**..... \$ 240 per person x _____ people = _____

or \$ 1300 per team/boat x _____ people = _____

Name: _____ Name: _____

Name: _____ Name: _____

Name: _____ Name: _____

Up to 6 people
per boat.

+ **Corn Hole Tournament (Sat)**..... \$ 75 per person x _____ people = _____

or \$ 150 per Team x _____ team = _____

Name: _____ Name: _____

Name: _____ Name: _____

Name: _____ Name: _____

Please call out
teammates. 2 /team

+ **Banquet & Party (Sat)**..... \$ 160 per person x _____ people = _____

Name: _____ Name: _____

Name: _____ Name: _____

Name: _____ Name: _____

Name: _____ Name: _____

Name: _____ Name: _____

All listed will be
placed in same party.

Total: \$ _____

Your payment must include the Convention registration fee, plus any activities you select for each person who will be attending.

Total fee(s) enclosed or to be charged to the credit card indicated below: \$ _____

☐ Enclosed is a check or ☐ American Express ☐ MasterCard ☐ Visa ☐ Discover

Credit Card #: _____ Exp. Date: _____

Name as it appears on card: _____ CVV2 Code: _____

Billing Address & Zip Code: _____

Cardholder Signature: _____

Make checks payable to **FICAP** • PO Box 4075 • Milton, FL 32572-4075 • info@ficap.org • www.ficap.org