# ALUMNI/DONOR (ADULTS)
# NJHA REGISTRATION

**STATE_____**

**THIS SPACE FOR OFFICE USE**

**REFER TO # _____**

**PAYMENT FOR _____**

**THIS SPACE FOR OFFICE USE**

**ORDER RECV'D_____**

**DATE RECV'D_____**

==========

**NATIONAL JUNIOR HORTICULTURAL ASSOCIATION 75TH CONVENTION**

**REGISTRATION INFORMATION MUST BE TYPED OR PRINTED. (PLEASE RETURN THIS FORM ALONG WITH PAYMENT and MEDICAL AUTHORIZATION FORM.**

**SATURDAY ONLY $60.00 (Includes Reception, Banquet and Program**
**If you are planning on more days, see G & G for all daily fees. If planning on coming in on Friday, the meal for Friday evening would be $25.00.**

## PLEASE FURNISH E MAIL ADDRESSES & PHONE NUMBERS

**Name _____ _____Male _____ Female**
**Last First (For name tag)**

**Address_____E-mail_____**

**City_____ State_____Zip_____**

**Home phone (_____) _____Cell phone (_____)_____**

**Date of Arrival_____Date of Departure_____**

**What Year Did You Serve _____ Office Held_____**

***CIRCLE ONLY ONE*: (FOR NAME BADGE) Alumni Donor Both**

**Handicap or special dietary needs such as vegetable, salt, gluten free, lactose_____**
_____
_____

**LONGWOOD GARDENS will provide guided tours**

**THERE ARE TWO TOURS SCHEDULED FOR MONDAY AFTERNOON (WHITAKER CENTER FOR SCIENCE AND ARTS PLUS THE CAPITAL BLDG.) WE CAN ONLY SCHEDULE 90 PEOPLE FOR THE CAPITAL BLDG. FIRST 90 TO REGISTER FOR THE CAPITAL BLDG WILL BE TOURING THE FACILITY. PLEASE CHECK YOUR CHOICE**

**WHITAKER CENTER FOR SCIENCE AND ARTS _____ CAPITAL BUILDING _____**
**Other tours are Milton Hershey School and Chocolate World**

**I GRANT NJHA THE RIGHT TO PUBLISH, AND COPYRIGHT MY IMAGE (INCLUDING AUDIO, MOVING IMAGE OR PHOTOGRAPHY) FOR EDUCATIONAL PROGRAMS, WEBSITES, & PROMOTION OF NJHA PROGRAMS YES ___NO___**

**GOING & GROWING NEWSLETTER TO FOLLOW FOR ALL OTHER INFORMATION.**