

*** * * PRE-REGISTRATION & MAILING LIST FORM * * ***

Please mail to NFB of NJ, 254 Spruce St., Bloomfield, NJ 07003

I will attend the Convention.

I cannot attend the Convention, but please put my name on the mailing list for more information. *** * * PLEASE PRINT CLEARLY * * ***

Name/s _____

Please list names of all attending, including children, on separate sheet.

Address _____

City, State, Zip _____

Phone _____ Email _____

REGISTRATION	Pre-Reg.	Walk-In	How Many?	TOTAL \$
REG.-ADULT	\$20	\$25		\$
REG.-CHILD 16 & under	Free	Free		00
LUNCH Fri., Nov. 11 ADULT or CHILD	\$10	\$15		
DINNER Fri., Nov. 11 ADULT or CHILD	\$25	\$30		
LUNCH Sat., Nov. 12 ADULT or CHILD	\$10	\$15		
BANQUET Nov. 12 ADULT or CHILD	\$35	\$40		
TOTAL ENCLOSED (Make check payable to NFB of NJ)				\$

How many for each banquet selection:

Salmon Prime Rib Vegetarian Kosher

I would like my agenda in: Large Print Braille E-File

Agenda will also be available on NFB Newsline and at www.nfbnj.org.