DAIRY PLANT FOOD SAFETY WORKSHOP REGISTRATION FORM

Please print all information as you wish it to appear on your badge. Please photocopy for additional registrants	
First Name: Last N	ame:
Title:	
Company:	
Address:	
City: State/Prov	rince: Postal Code:
Phone: Email:	
Please provide written description of any special accommodations to fully participate:	
Emergency Contact Name and Phone Number:	
Registration Fee: \$495	
Please check the workshop you are registering for: May 5-6, 2020 Plymouth, WI (F-11043) May 19-20, 2020 Visalia, CA (F-11044) July 21-22, 2020 Twin Falls, ID (F-11045) September 23-24, 2020 Madison, WI (F-11046) October 6-7, 2020 Dallas, TX (F-11047)	
Payment Information Payment must be enclosed with registration form. Check/money ord payable to the International Dairy Foods Association. Visa MC Am. Ex. Discover Check	ders must be in U.S. funds only and should be made
	Expiration Date: Security Code:
	•
Name on Card:S	Signature:
Return to: International Dairy Foods Association 1250 H Street NW, Suite 900 Washington, DC 20005 Phone: (202) 737-4332 Email: registrar@idfa.org	FOR OFFICE USE ONLY 35000-F-11038 / 11039 / 11040 / 11041 Check Amt. Check #

Refund Policy

Full refunds will be granted for written cancellations received up to three weeks before the meeting. Cancellations received 1-3 weeks before the meeting will be eligible for a 50% refund. No refunds will be granted a week before the meeting. All cancellations must be received in writing to registrat@idfa.org. Substitutions may be made without penalty. IDFA reserves the rights to cancel all unpaid registrations.

ENTER FOR U.S. DAIRY.

HEALTHY PEOPLE • HEALTHY PRODUCTS • HEALTHY PLANET