



MAIL-IN CHECK FORM

IAFCI Florida Chapter

presents

2024 Annual 2 Day Training Seminar

October 24 & 25, 2024

LOCATION: ROSEN CENTRE

9840 International Dr. Orlando, FL 32819

IAFCI TAX ID# 94-1730807 (501C6)

*Registration and payment by mail: **PLEASE COMPLETE THIS FORM AND SEND IF REGISTERING BY MAIL:**

Checks must be payable to IAFCI Florida Chapter.

PO Box 825232

SOUTH FLORIDA, FL. 33082

IAFCI MEMBER? YES ___ NO ___

IAFCI Member Fee: \$275

Non-Member Fee: \$325

Non-Member Applying for IAFCI Membership Fee: \$450. Please complete the New Membership Application found [HERE](#). Send completed New Membership form to Support@iafci.org

NAME: _____

EMPLOYER: _____

ADDRESS: _____

CITY, STATE, ZIP CODE _____

BUSINESS PHONE: _____

E-MAIL: _____

Questions? Please email Sam Fadel florida@iafci-chapter.org