



AMB CONVENTION,  
October 24-28, 2018  
Shanty Creek Resort, Bellaire, MI

AMB USE ONLY	
Amount	_____
Postmarked	_____
Check #	_____

Member # \_\_\_\_\_ Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Is this your first AMB convention?    Yes                   No

**IMPORTANT:** You must be a **current AMB member** to attend this convention. Before completing this form, please read the registration policies in the convention selection booklet. Failure to follow the instructions may result in a delay in processing your registration.

- If available, I would like more than 14 hours of classes (no extra hours fees).
- I will volunteer to help as needed.

**Registration Summary** – Send the following:

- This completed and signed registration form.  
(Be sure to keep a copy for your records.)
- A check made payable to “**AMB**” for the Total Amount due below

\$ \_\_\_\_\_ \$65.00 Registration Fee (Fee includes: Meeting Space/Set Up Costs, Special Events/Programs, Audio/Visual Equipment, Publicity, Selection & On-Site Booklets, Registration/Nametags, Workshop-Printing/Postage, Decorations & Miscellaneous expenses.)

\$ \_\_\_\_\_ \$10.00 Late Fee – If postmarked **after 6/15/2018**

\$ \_\_\_\_\_ **TOTAL AMOUNT ENCLOSED**

Information for lunch on Thursday will be included with your class assignment letter.

**BEFORE JUNE 15 SEND completed form and check payable to “AMB” to:**  
Linda Good, 10571 Cedar Road, Cedar, MI 49621

**AFTER JUNE 15 – completed form and check payable to “AMB” to**  
Juanita Elkins, 1309 Goodrich St, Lansing, MI 48910

I understand that a refund, minus a **\$25.00 processing fee**, may be obtained until September 5, 2018 upon written notice of cancellation and that **no refunds** will be issued after that date. I understand that I cannot change classes once they are assigned. I also understand that **listing very few preferences decreases the likelihood that I will be placed in any classes**. If I choose to remain on the waiting list after September 5, 2018, I acknowledge that I forfeit any possible refund.

	Hours	Day	Class #
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			

Signature \_\_\_\_\_ Date: \_\_\_\_\_

- Registration Questions    Contact:    Linda Good.....231.590.4982.....goodbasket3@gmail.com
- Workshop Questions      Contact:    Juanita Elkins.....517.388.0041.....elkins@ameritech.net
- All other Questions      Contact:    Leslie Spurrier.....616.452.3069.....jlspurrier@comcast.net
- Debra Mellentine....616.204.3562.....munsnor@gmail.com

<b>COMPLETED FORM AND CHECK DUE BY JUNE 15</b>
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