

# WEAVER FEVER

## 2025 AMB Convention

### GENERAL INFORMATION FORM

AMB MEMBER NUMBER \_\_\_\_\_ (if known)

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

We must have a street address for shipping purposes. Baskets, if sent, will be returned by USPS. Please list a shipping address below if different from the address above.

\_\_\_\_\_  
\_\_\_\_\_

All classes will be scheduled randomly throughout the convention. Eight, six, and four hour classes will be taught Wed-Sat; 12-hour classes will be taught Wed/Thurs or Fri/Sat; only four hour classes will be scheduled on Sunday.

Please indicate if there are any days that you will **NOT** be able to teach.

\_\_\_\_\_

### FEES

- There will be no fees for submitting class or program proposals.
- For mailing baskets, return shipping and insurance fees are \$5.00 PER BOX

Fee per Box \$5.00 X \_\_\_\_\_ = \$ \_\_\_\_\_

FEE TOTAL \$ \_\_\_\_\_ Please make check payable to **AMB**.

**PROPOSAL FORMS, DIGITAL PHOTOS, BOX FEES (if appropriate and necessary)** must be received by: **FEBRUARY 21, 2025**.

Do not include proposal forms and fee check in the box with the baskets!

Mail to: April Norton, 4398 Satinwood Dr, Okemos MI, 48864  
517-881-0840 amblaptop1@gmail.com