

New York Welfare Fraud Investigators Association

27th Annual Training Seminar

Hyatt Regency Rochester

125 East Main Street

Rochester, NY 14604

Training Seminar Registration Form

June 6, 2010 June 9, 2010

Please Type or Print Information

Name: _____
(Last) (First) (M.I.)

Email Address: _____

Agency/Organization: _____

Directory Mailing Address: _____

Title: _____

Fraud Staff _____ Child Care Staff _____ TA Staff _____ Other _____

Telephone: _____

NOTE: Contact information will be published in the NYWFIA Membership Directory

NYWFIA Membership Included in Registration Fees

_____ \$165.00 Registration – Entire Conference

_____ \$85.00 Monday only OR Tuesday only

_____ \$45.00 Wednesday Only

Luncheon Selection: Grilled Salmon Herb Crusted Chicken Vegetarian
(Monday)

Dinner Selection: Sirloin Steak Seared Halibut Vegetarian
(Tuesday)

***Please circle your above meal selection**

_____ Full Seminar Registration Enclosed

_____ Daily Registration Fee Enclosed (Number of days_____)

_____ Voucher – Name of Person/Agency/Company responsible for Payment:

Note: You will be personally responsible for payment if your agency fails to provide payment.

Mail Registration Form and checks made payable to: NYWFIA by May 21, 2010 to:

Laurie Fregeau, Treasurer -NYWFIA

P.O. Box 165, Ballston Spa, New York 12020

Tel: 518-884-4118