



# 2010 ANNUAL CONFERENCE

NATIONAL COUNCIL OF STATE AGRICULTURAL FINANCE PROGRAMS (NCOSAFP)

September 19 - 22, 2010

Hilton Harrisburg, Harrisburg, PA



## Registration Form

Please duplicate form for additional registrants.

Name: \_\_\_\_\_ @ \$325 (\$275 before Sept. 1) = \$ \_\_\_\_\_

Title: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Spouse/Guest: \_\_\_\_\_ @ \$175 (\$150 before Sept. 1) = \$ \_\_\_\_\_

Name: \_\_\_\_\_ @ \$325 (\$275 before Sept. 1) = \$ \_\_\_\_\_

Title: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Spouse/Guest: \_\_\_\_\_ @ \$175 (\$150 before Sept. 1) = \$ \_\_\_\_\_

Total Registration Fee **Enclosed** = \$ \_\_\_\_\_

Please make checks payable to:

**NCOSAFP**

Mail completed form **and** payment to:

**Tony Stafford**  
NCOSAFP Treasurer  
Missouri Ag and Small Business  
PO Box 630  
Jefferson City MO 65102  
Phone: 573-751-2129  
Fax: 573-522-2416

