

# INSTALLATION OF OFFICERS BANQUET REGISTRATION FORM

## ATTENDEE REGISTRATION INFORMATION

|                      |             |
|----------------------|-------------|
| NAME _____           |             |
| COMPANY _____        |             |
| TITLE _____          |             |
| STREET ADDRESS _____ |             |
| CITY/STATE/ZIP _____ |             |
| PHONE _____          | EMAIL _____ |

## ADDITIONAL ATTENDEES FROM SAME COMPANY

|                         |                         |
|-------------------------|-------------------------|
| NAME _____              | NAME _____              |
| TITLE _____ EMAIL _____ | TITLE _____ EMAIL _____ |

## REGISTRANTS WILL ATTEND

- INSTALLATION OF OFFICERS BANQUET - \$199
- AGC BUSINESS MEETINGS - NO CHARGE
- GUEST EVENT - \$115 (If selecting this option, please specify which attendee: \_\_\_\_\_)

## PAYMENT INFORMATION

|  |                        |
|--|------------------------|
| METHOD OF PAYMENT<br><input type="checkbox"/> CHECK MADE PAYABLE TO AGC OF CALIFORNIA <input type="checkbox"/> INVOICE ME (Invoice options for AGC member companies only)<br>CREDIT CARD: <input type="checkbox"/> VISA <input type="checkbox"/> MASTERCARD <input type="checkbox"/> AMEX <input type="checkbox"/> OTHER _____ | TOTAL AMOUNT DUE _____ |
| NAME ON CREDIT CARD _____  | EXPIRATION DATE _____  |
| CREDIT CARD NO. _____  | CVV CODE _____         |
| AUTHORIZED SIGNATURE _____   | DATE _____             |

General Terms: I understand that this application becomes a contract when signed and accepted by AGC of California. I agree to pay 100% of the Total Amount Due today, unless I am a member of an AGC member company and choose to be invoiced; I understand that all balances must be paid in full within 30 days of receiving invoice, unless other terms are discussed with the AGC Events Department. Cancellation Policy: Cancellations must be received in writing. For each registrant that cancels, a full refund, minus a \$50 processing fee, will be granted on cancellation requests received on or before January 10, 2019. Absolutely no refunds will be given after January 10, 2019 and alternate/substitute registrants will be encouraged at that point.

Please return Sponsor Registration Form with payment to: AGC of California, 3095 Beacon Blvd., West Sacramento, CA 95691 or email completed form to [events@agc-ca.org](mailto:events@agc-ca.org). Online registration also available at [installation.agc-ca.org](http://installation.agc-ca.org).



**AGC  
CALIFORNIA**