

**MINNESOTA GOVERNMENT FINANCE OFFICERS ASSOCIATION
2010 ANNUAL CONFERENCE
“DON'T STOP THINKIN' ABOUT TOMORROW”**

<u>WHEN:</u>	September 22– 24, 2010
<u>WHERE:</u>	Arrowwood Resort Alexandria, Minnesota

CONFERENCE [9/22-24/2010]	BY	AFTER
<u>REGISTRATION FEE</u>	<u>August 27</u>	<u>August 27</u>
Member	\$ 225.00	\$ 250.00
Non-Member	\$ 285.00	\$ 310.00

MAKE CHECKS PAYABLE TO: Minnesota GFOA

MAIL REGISTRATION/PAYMENT TO: Liz Berger, Accounting Coordinator
City of Minnetonka
14600 Minnetonka Blvd
Minnetonka, MN 55345
Fax (952) 939-8244

Note: You must register on-line at www.mngfoa.org to pay by credit card (MC / Visa only).

LODGING: YOU MUST make separate arrangements by completing the attached lodging registration form for Arrowwood Resort by August 27, 2010. YOU MUST MAIL OR FAX YOUR RESERVATION FORM. Reservations are on a first-come first-served basis and overflow lodging reservations WILL BE made for you by Arrowwood. You are encouraged to make arrangements to share a room.

Townhome rooms are available at the standard room rate. Each bedroom in a townhome unit will be considered a standard room. Please direct any questions regarding townhome assignments to Arrowwood Resort.

REFUND POLICY: All cancellation requests regarding lodging must be directed through Arrowwood Resort and are subject to their policies. Conference cancellation requests received by September 17, 2010 will be refunded in full. All cancellation requests received after September 17, 2010 will be subject to a \$100 charge to cover expenses. Requests for refunds on the conference fee will only be considered up to September 24, 2010.

***THE ANNUAL CONFERENCE COMMITTEE INVITES ALL PARTICIPANTS TO DRESS CASUALLY
AND ENJOY THIS YEAR'S CONFERENCE***

REGISTRATION FORM

[PLEASE RETURN WITH PAYMENT]

**MINNESOTA GOVERNMENT FINANCE OFFICERS ASSOCIATION
2010 ANNUAL CONFERENCE**

“DON'T STOP THINKIN' ABOUT TOMORROW”

YOUR NAME WILL APPEAR ON YOUR NAME TAG AS SUBMITTED BELOW!!!

LAST NAME _____ **FIRST NAME** _____

POSITION _____

EMPLOYER _____

ADDRESS _____

CITY _____ **STATE** _____ **ZIP** _____

PHONE _____ **E-MAIL** _____

CONFERENCE [9/22-24/2010]

REGISTRATION FEE

**BY
August 27**

**AFTER
August 27**

Member **\$225.00** **\$250.00** _____

Non-Member **\$285.00** **\$310.00** _____

TOTAL PAID REGISTRATION _____

IS THIS YOUR FIRST MGFOA CONFERENCE? **YES NO**

IDENTIFY SPECIAL DIETARY NEEDS: _____

[SOMEONE WILL CONTACT YOU BY PHONE OR EMAIL REGARDING YOUR NEEDS]
