

Los Angeles Chapter — AAI Advance Registration

Enter Meeting Date: ____ / ____ / 201____

REGISTRANTS / TOTAL FEES

____ Registrants @ \$10.00 / person

\$ ____ Total Fees

Please indicate any ADA disability needs:

REGISTRANT INFORMATION (PLEASE PRINT)

Registrant Name _____

Email _____

Phone (____) _____

Guest Name(s) _____

Advanced registration fee: \$10.00 / person

At the door: \$12.00 (space permitting)

YES, I would like more information about volunteering to help this chapter plan and present investment education programs.

----- PLEASE CUT ALONG THIS LINE AND MAIL TO THE ADDRESS BELOW -----

Los Angeles Chapter
PO Box 854
Santa Monica, CA 90406-0854

Include your check payable to: AAI with your completed form

Advance registrations must be received 6 days prior to event date