



ATTENDEE REGISTRATION FORM

Name: _____
First Middle Last Suffix

Company Name: _____

Mailing Address _____
Street Number Street Name
City State Zip Code

Office No: _____ Fax No: _____ Cell No: _____

Email Address: _____

Emergency Contact Name: _____

Emergency Contact Number: _____

MEMBERSHIP INFORMATION

- Are you a current licensed national member? Yes No
- Are you a current national apprentice member? Yes No
- Are you a current national student member? Yes No
- Are you a current NFDMA National Board Member? Yes No

If yes, please indicate which position.

- Executive Committee Member
- District Governor
- Past National President
- National Parliamentarian
- State President
- State Secretary
- National Chaplain
- Public Relations Commissioner
- Sergeant-At-Arms
- Standing Committee Chair

FUNERAL HOME TITLE (Select All That Apply)

- Owner
- Manager
- Funeral Director
- Embalmer
- General Employee

REGISTRATION FEES (CEU credits granted to licensed professionals only) (Deadline Friday, April 3, 2026)

Pre-Registration	Price	Onsite Registration	Price
<input type="checkbox"/> Licensed Professional:	\$200	<input type="checkbox"/> Licensed Professional:	\$300
<input type="checkbox"/> Guest: (No CEU Credits)	\$300	<input type="checkbox"/> Guest: (No CEU Credits)	\$400
<input type="checkbox"/> Apprentice:	\$100	<input type="checkbox"/> Apprentice:	\$150
<input type="checkbox"/> Student:	\$100	<input type="checkbox"/> Student:	\$150

Make checks payable to NFDMA, Inc. | 6290 Shannon Parkway | Union City, Georgia 30291

Feel free to register online at www.nfdma.com.

Check #:

Credit Card +3% processing fee (Please contact national office)

NO CHECKS ACCEPTED FOR ONSITE REGISTRATION!

All registrations are final NO REFUNDS!