

2017 COOK. CRAFT. CREATE. CONVENTION & SHOW REGISTRATION

REGISTER ONLINE at www.acfchefs.org

MAIL OR FAX TO:

American Culinary Federation
180 Center Place Way
St. Augustine, FL 32095
(F) 904-940-0741 | (P) 800-624-9458



ORLANDO, FLORIDA | JULY 9-13, 2017

Name: _____ Member ID: _____
 Current mailing address: _____ home or work
 City: _____ State: _____ Zip: _____
 Home Phone: _____ Cell Phone: _____ Preferred Email: _____
 Employer: _____
 Position/Title: _____ Work Phone: _____

*If provided you may receive email notices of products and special offers from ACF sponsors and exhibitors.

FULL REGISTRATION PACKAGE includes access to more than 50 1-hour seminars and demos, 2 general sessions, 2-day trade show, welcome reception, 4 breakfasts, 2 lunches, Chef Professionalism Award Dinner and the President's Grand Ball. Does not include AAC dinner or chapter events.

| Member Status | Early Rate* | Standard Rate | Onsite Rate | |
|-----------------------|-------------|---------------|-------------|---------|
| ACF Member | \$750 | \$875 | \$1,000 | |
| Junior/Senior/Student | \$625 | \$725 | \$825 | |
| Non-ACF Member | | \$1,200 | \$1,300 | = _____ |

Spouse/Guest Name: _____ (same rate as member) = _____

*Early Rate restrictions: must be an ACF member **in good standing**, register and pay in full by May 14, 2017, the early registration deadline.

FAMILY MEAL PACKAGE

Family Meal Package (includes 4 breakfasts, welcome reception, Chef Professionalism Award Dinner and President's Grand Ball)

Qty: _____ x \$500 = _____

A LA CARTE REGISTRATION OPTIONS (see conference schedules for dates and times of meal functions)

One-Day Conference Program Badge includes breakfast for that day. Note: Program badges may not be purchased with full registration.

| Members | Monday (7/10) | Tuesday (7/11) | Wednesday (7/12) | Thursday (7/13) | Qty: _____ x \$200** = _____ |
|------------|---------------|----------------|------------------|-----------------|------------------------------|
| Nonmembers | Monday (7/10) | Tuesday (7/11) | Wednesday (7/12) | Thursday (7/13) | Qty: _____ x \$250** = _____ |

Meal Tickets

| | |
|--|----------------------------|
| Welcome Reception (Sunday 7/9) | Qty: _____ x \$80 = _____ |
| Chef Professionalism Award Dinner (Monday 7/10) | Qty: _____ x \$125 = _____ |
| President's Grand Ball (includes one drink ticket) (Thursday 7/13) | Qty: _____ x \$150 = _____ |
| President's Grand Ball Youth (children 12 and under) (Thursday 7/13) | Qty: _____ x \$60 = _____ |

President's Grand Ball Seating Requests for preferred seating will be accepted until **June 9, 2017**.

I/we prefer to be seated with _____ (must be registered for President's Grand Ball)

Note: Every effort will be made to seat you with your preference; however, seating requests are not guaranteed.

| | | | | | |
|---|---------------|----------------|------------------|-----------------|-----------------------------|
| Breakfast | Monday (7/10) | Tuesday (7/11) | Wednesday (7/12) | Thursday (7/13) | Qty: _____ x \$45** = _____ |
| Lunch | Monday (7/10) | | | Thursday (7/13) | Qty: _____ x \$60** = _____ |
| Tradeshaw | | Tuesday (7/11) | Wednesday (7/12) | | Qty: _____ x \$25** = _____ |
| American Academy of Chefs® Dinner (Tuesday 7/11; AAC® members only, maximum of two tickets) | | | | | Qty: _____ x \$150 = _____ |

Optional activities, special workshops and various opportunities are available online.

**Cost per day

TOTAL DUE FOR REGISTRATION \$ _____

Refund Policy: Request for refund must be made in writing and postmarked no later than 30 days prior to start of event. A \$50 processing fee will be deducted from refund amount.

PAYMENT MADE BY:

I have enclosed a check made payable to the American Culinary Federation (ACF).

Please bill my: Visa MasterCard Amex Discover

Card Number: _____ Name on Card: _____ Exp Date: _____

Signature: _____ Date: _____

REGISTER ONLINE at www.acfchefs.org for additional workshops and a la carte meals.