# 2016 Roadside Farm Market Tour

This is a list of the information needed to complete **ONLINE REGISTRATION** which opens at **10:00 a.m. EDT on Thursday, May 12, 2016**.

Please note that you will register one attendee at a time. The registration confirmation will be sent to the attendee's e-mail address. The registrant is required to provide an alternate e-mail address for the confirmation to be e-mailed to a county Farm Bureau representative (such as the county secretary).

Payment may be made by Credit Card or by Check (to be mailed to Kentucky Farm Bureau Federation the same day).

Tour seating is limited and available on a first come, first served basis. The non-refundable registration fee includes bus transportation, hotel rooms (room and tax only), group meals, and snacks. One dinner and one breakfast will be on the participant's expense while we are in Holland, Michigan. Participants will be responsible for any additional expenses caused by travel delays including weather-related problems. If the 2016 Roadside Farm Market Tour is officially cancelled, a refund is possible minus any penalties or non-refundable expenses that apply.

## **Registration Type – Choose One**

- Single Non-Member Hotel Room & Registration \$700
- Double Non-Member Hotel Room & Registration (ONE BED) \$475 \* Double occupancy rate is Per Person
- Double Non-Member Hotel Room & Registration (TWO BEDS) \$475 \* Double occupancy rate is Per Person
- Single Member Hotel Room & Registration \$650
- Double Member Hotel Room & Registration (ONE BED) \$425 \* Double occupancy rate is Per Person
- Double Member Hotel Room & Registration (TWO BEDS) \$425 \* Double occupancy rate is Per Person

(KFB Certified Roadside Farm Market participants receive up to two discounted registrations for the tour, a \$100 value)

## **Attendee Information**

First and Last Name Name Badge First Name County Farm Market Name (if applicable) Mailing Address (Street, City, State, Zip Code) Attendee E-Mail Address Alternate E-Mail Address Mobile Phone Number Home Phone Number

## **Emergency Contact Information**

Emergency Contact - Name Emergency Contact - Relationship Emergency Contact - Home Phone Emergency Contact - Mobile Phone

## **Travel Preferences**

Name of person, if known, with whom you wish to room Dietary/Special Needs