



Upper Valley Planned Giving Council Seminar Registration Form

Name: _____

Organization: _____

Title: _____

Street Address: _____

City/State/ Zip: _____

Email: _____

Phone: _____

_____ I plan on attending and am a member of UVPGC

_____ I would like to bring _____ from _____
as my guest* (Name) (Organization)

_____ I plan on attending and am not a member of UVPGC - enclosed is my
check in the amount of \$40

**Return this form with your
nonrefundable check payable to:**

**"Upper Valley Planned Giving Council"
UVPGC, PO Box 974,
Hanover, NH 03755**

**As part of your member benefits, you are entitled to bring one first time guest to the seminar. If this is not their first time attending an UVPGC seminar or if you would like to bring more than one guest, please enclose the non-member rate per person.*