

REGISTRATION FORM

Annual Meeting

Federation of North Carolina Historical Societies
North Carolina Literary and Historical Association

Place: New Bern, North Carolina

Date: Friday and Saturday, November 13-14, 2009

Please list your name(s) and affiliation below as you want them to appear on your nametag.

Name(s): _____

Address: _____

Affiliation: _____

Full Registration _____ x \$55 _____
(includes Fri. reception, Sat. morning workshop or lecture, afternoon and evening programs, Sat. reception and meal, and two-day pass to Tryon Palace Historic Sites and Gardens)

___ check if you will attend Friday evening reception

___ check if you will attend Sat. a.m. Federation workshop

↑ choose one if applicable

___ check if you will attend Sat a.m. Literary New Bern talk

___ check if you prefer vegetarian meal

Workshop only _____ x \$10 _____

Saturday Afternoon only _____ x free _\$0_____

Total enclosed \$_____

By Wednesday, November 4, please send this form and (if applicable) a check for the correct amount to:

Mr. Parker Backstrom
North Carolina Literary and Historical Association
4610 Mail Service Center
Raleigh, NC 27699-4610
Phone: (919) 807-7280

Make check payable to N. C. Literary and Historical Association