

Complete and mail your registration to IHA Conference, PO Box 5667, Jacksonville, FL 32247.
Please make checks payable to International Herb Association.

NAME _____
 ADDRESS _____

 PHONE _____ E-MAIL _____
 DEPOSIT _____ CREDIT CARD NUMBER _____
 EXPIRATION DATE _____ SECURITY NUMBER _____
 SIGNATURE _____

Please check appropriate spaces below and send with check or credit card info.

	Early bird price	After June 15 th
Member conference registration fee (2 lunches and 2 dinners included)	\$175 _____	\$200 _____
Non-member conference registration fee (2 lunches and 2 dinners included)	\$200 _____	\$225 _____
Saturday Public Education Day only (lunch included)	\$75 _____	\$85 _____
Sunday Professional Tracts only (lunch included)	\$75 _____	\$85 _____
Half-day attendance fee (lunch on you own) Sat AM ___ Sat PM ___ Sun AM ___ Sun PM ___	\$45 _____	\$50 _____
Huntsville Botanical Garden Discount Sat (-\$10)	_____	_____
Additional meals for family/guests:		
Lunch Saturday—box lunch in the garden	\$13 _____	
Saturday Herbal Buffet & Awards, Murray Hall	\$30 _____	
Lunch Sunday—South of the Border Buffet, Hilton	\$20 _____	
Sunday Herbal Dinner & Auction at Hilton	\$35 _____	
Food choice: Regular menu _____	Vegetarian option _____	
Friday, pre-conference bus trip	\$20 _____	
Monday, post-conference field trip	\$20 _____	
Both pre-&-post field trips	\$35 _____	
Vendor table (both days)	\$75 _____	
Vendor table (one day only)	\$40 _____	Saturday ___/Sunday ___
TOTAL AMOUNT ENCLOSED	_____	_____