



REGISTRATION INFORMATION COLLECTION FORM FOR COUNTIES

No paper registration forms will be accepted by KFB. This form exists to help County Coordinators collect attendees' registration information only.

First Name: _____ Last Name: _____

Name for Badge (if different than above): _____

County: _____

Email: _____ Phone: _____

Attendee Type:

- | | | |
|--|---|--|
| <input type="checkbox"/> Member | <input type="checkbox"/> Collegiate | <input type="checkbox"/> Non-Member |
| <input type="checkbox"/> YF&R County Chair | <input type="checkbox"/> Collegiate Officer | <input type="checkbox"/> County Coordinator |
| | <input type="checkbox"/> Collegiate Adviser | <input type="checkbox"/> Ag Ambassador/FFA/4-H |

Collegiate Chapter (if applicable): _____ Major: _____

Parents: If you plan to bring your children, please list the number that will be eating meals at the conference (\$40/child): _____

Is this your first time attending the Kansas YF&R Leaders Conference?

- Yes
- No

I plan to attend the following meals (All are included in the registration fee. Check all that apply):

- Collegiate FB Luncheon (Friday Noon - Included for Collegiate Members & Advisers Only)
- Conference Kick-Off (Friday Evening)
- Business & Bacon (Saturday Morning)
- YF&R Networking Lunch (Saturday Noon)
- District Networking Dinner (Saturday Evening)
- Breakfast by Chris Cakes (Sunday Morning)

Dietary Restrictions: _____

Sponsorship Information (for Collegiate members with home county sponsorship):

Sponsoring County: _____

Paying for (check all that apply): Registration Hotel Other: _____