

MAIL-IN REGISTRATION - 2024 Kentucky Fruit and Vegetable Conference
Holiday Inn/Slone Conference Center, Bowling Green, KY
January 3-4, 2024

Online preregistration: <https://2024KYFruitVegConf.eventbrite.com>

Mark one: REGISTRATION
 I am not able to attend--please continue my membership(s) as listed below.

NAME (Please print) _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE: () _____ OCCUPATION/FIRM _____

E-Mail _____

Please List Name(s) of Additional Registrants: _____

I am interested in being considered as a board member in:
 KSHS (fruit growers) KVGA (vegetable growers)

Please let us know if you are a:

- Grower
- Extension Agent
- Commercial Pesticide Applicator
- Other

Please check if you are a US Veteran

What are your top 3 research needs?

1. _____
2. _____
3. _____

Registration is complimentary for students and children under 15 years of age. A SEPARATE FORM IS REQUIRED FOR EACH REGISTRANT EXCEPT FOR SPOUSE AND CHILDREN. Please copy form if needed. You can also print forms from the Conference website (<https://kyhortcouncil.org/2024-ky-fruit-vegetable-conference/>). Registration questions, call: 859-490-0889 or email: info@kyhortcouncil.org.

2024 MEETING REGISTRATION

Indicate the number of registrations and total amount.

	Number	Total
<input type="checkbox"/> Kentucky State Horticultural Society <i>annual membership in KSHS (fruit growers) & meeting registration</i>		
Number attending x \$50 each	_____	_____
	X \$50	
<input type="checkbox"/> Kentucky Vegetable Growers Association <i>annual membership in KVGA (veg growers) & meeting registration</i>		
Number attending x \$50 each	_____	_____
	X \$50	
<input type="checkbox"/> Organic Association of Kentucky <i>annual membership in OAK (organic growers) & meeting registration</i>		
Number attending x \$50 each	_____	_____
	X \$50	
<input type="checkbox"/> Conference Farm Sponsorship		
<i>Voluntary contribution toward Conference expenses (room rental, lunches, etc)</i>	_____	_____
	X \$125	
<input type="checkbox"/> Kentucky Horticulture Research Initiative		
<i>Voluntary, tax-exempt contribution to KHRI for industry research</i>		
Write in donation _____		

TOTAL AMOUNT DUE

Please make checks payable to: KY State Horticultural Society (KSHS). Mail form and check to: Kentucky Horticulture Council, PO Box 21736, Lexington, KY 40522-1736.

Check # _____

Please note that the Conference is the first Wednesday and Thursday of January and lunches are included in the registration fee