

NEBRASKA COOPERATIVE COUNCIL
79TH ANNUAL MEETING/HALL OF FAME/RECEPTION
 YOUNES CONFERENCE CENTER NORTH - KEARNEY
 WED, NOVEMBER 20, 2024
 4:00 TO 8:30 PM (CT)

Office Use Only
Date: _____
Amount: _____
Check # _____

REGISTRATION FORM

Managers are asked to register all participants, including board members, spouses and key staff. Individuals who are not pre-registered are more than welcome to attend. For these individuals, cooperatives will be billed directly.

Registration...Includes the Business Session, Hall of Fame Induction, and the Member Reception (w/ a large array of hot and cold hors d'oeuvres, cocktails and dessert).

Advance Registration Discount...To receive this discount, the pre-registration form and payment must be received in the Council office by **November 6, 2024**.

Cancellations...must be made through the Council office at 402/475-6555. Full refunds through November 13; no refunds after this time.

Overnight Accommodations...Contact the Crowne Plaza (which is attached to the conference center) directly at 308/238-7000. Make reservations by October 23 and state you are with the Nebraska Cooperative Council to receive the special room rate of \$129.95.

Annual Meeting / Hall of Fame / Reception Participants:

Name and Hometown (for nametag) <small>[the co-op/organization's name and headquarters will also be listed]</small>	Name and Hometown (for nametag) <small>[the co-op/organization's name and headquarters will also be listed]</small>

(use additional sheets if needed)

Annual Mtg/HOF/Reception Registration Fee: _____ participants @ \$ _____ * each = \$ _____

*Fee schedule: Pre-registration (form and payment must be rec'd by 11.6.24)\$ 60.00
 General Registration\$ 75.00
 Non-members and/or Members Not in Good Standing.....Add \$60 to appropriate fee above

ORGANIZATION NAME: _____ TOWN: _____
(as you want it to appear on your name tag)

Email completed form to: Deb at debm@nebr.coop

Mail check payable to: Nebraska Cooperative Council
(We are not able to take credit cards) 635 South 14th St Suite 125 Lincoln, NE 68508

Questions: 402.475.6555

THIS FORM WILL SERVE AS YOUR INVOICE