#### REGISTRATION FOR THE 2019 FEACT PRE-RETIREMENT SEMINAR

**November 12, 2019 / 8:00 a.m. to 4:30 p.m.**

**MDC Training Center, 125 Maxim Road, Hartford CT 06114**

AGENCY NAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CONTACT PERSON: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PHONE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ FAX:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employees who will attend the FERS & TransFERS Session on Wednesday, November 12, 2019

\*PLEASE ENSURE CORRECT SPELLING.

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**COST IS** *$75.00* **PER PERSON -- SORRY, NO REFUNDS**

*MAKE CHECKS PAYABLE TO: “Federal Executive Association of Connecticut”*

*FOR CREDIT CARDS, PLEASE COMPLETE THE INFORMATION ON PAGE 2.*

NOTE: SEATING WILL BE FIRST COME, FIRST SERVED.

*REGISTRATION DEADLINE: Friday, October 18, 2019.*

SUBMIT THIS FORM WITH $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_FOR # \_\_\_\_\_\_\_\_\_\_\_\_ATTENDEES

PLEASE SUBMIT THIS FORM BY MAIL, FAX or EMAIL TO: **(no phone registrations will be accepted)**

#### Federal Executive Association of Connecticut

#### ATTN: FEACT

#### 135 High Street

Room 331

Hartford, CT 06103

Email: [feaofct@gmail.com](mailto:feaofct@gmail.com)

Fax: 860-724-9843

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Credit Card Type: (Circle One) MC, American Express, VISA

Credit Card Number: \_\_\_\_\_\_\_\_\_\_\_ - \_\_\_\_\_\_\_\_\_\_\_ - \_\_\_\_\_\_\_\_\_\_\_\_\_\_ - \_\_\_\_\_\_\_\_\_\_\_\_

Expiration Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 3-digit security code \_\_\_\_\_\_\_\_\_\_

Cardholder Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cardholder Address and Zip Code

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cardholder Signature (required)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cardholder's Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Questions should be directed to (866)931-2878 Ext 13024

SEND, EMAIL OR FAX COMPLETED FORM TO FEACT, 135 High Street, Room 331, Hartford, CT 06103 or FAX TO (860)724-9843 or email FEAofCT@gmail.com