



ALPHA BETA GAMMA ®  
2017 NATIONAL LEADERSHIP CONFERENCE  
Registration Form

***Please fill out this form for each conference attendee.***

Student \_\_\_\_\_ Adviser \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

City/State/ \_\_\_\_\_

Zip \_\_\_\_\_

Phone(H) \_\_\_\_\_ (C) \_\_\_\_\_

Email \_\_\_\_\_

Emergency Contact \_\_\_\_\_

Emergency Phone \_\_\_\_\_

Chapter \_\_\_\_\_

School \_\_\_\_\_

Address \_\_\_\_\_

Adviser's Name \_\_\_\_\_

Adviser's Phone \_\_\_\_\_

Adviser's Email \_\_\_\_\_

Mail this form along with registration fee (payable to **ALPHA BETA GAMMA**) to:

**Marc Zagara**  
Georgia Perimeter College  
2101 Womack Road  
Dunwoody, GA 30338  
[mzagara@gpc.edu](mailto:mzagara@gpc.edu)

For Official Use Only - DO NOT WRITE IN THIS SPACE

Total Received \_\_\_\_\_