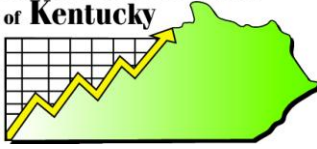


**AgriBusiness Association
of Kentucky**



PESTICIDE MANAGEMENT WORKSHOP

Holiday Inn Hurstbourne – Louisville, KY

Tuesday, February 14, 2012

9:00 a.m. until 3:30 p.m.

Registration form

Registration Fee: \$40

Name(s): _____

Company: _____

Address: _____

City, State Zip: _____

Phone: _____ Fax: _____

Email: (for registration confirmation) _____

Total Registration Fees: ____ x \$40= _____

Payment Method:

Check #: _____ (Make payable to the AgriBusiness Association of Kentucky or ABAK)

Credit Card: VISA MasterCard AMEX Discover

Card Number: _____ Exp. Date: _____

Signature: _____

Individual name on card (please print): _____

Billing address on card (if different than above): _____

Register online: www.kyagbusiness.org

**Mail or fax form and
payment to:**

**ABAK
512 Capitol Avenue
Frankfort, KY 40601**

**(502) 226-1122
Fax (502) 875-1595**