

**FTA ANNUAL MOTOR FUEL TAX SECTION CONFERENCE  
OCTOBER 3-6, 2004  
QUINCY (BOSTON), MASSACHUSETTS**

**DELEGATE REGISTRATION FORM**

NAME:	
PREFERRED NAME (FOR BADGE):	
TITLE:	
AGENCY/COMPANY:	
MAILING ADDRESS:	
CITY, STATE, ZIP:	
TELEPHONE:	FAX:
E-MAIL ADDRESS:	
GUEST NAME:	

**REGISTRATION FEE SCHEDULE:**

FTA Motor Fuel Tax Section Tax ID No. 93-0805250

<p style="text-align: center;"><b><u>DELEGATE CONFERENCE FEES</u></b></p> <p>___ \$380, Registration <b>ON OR BEFORE</b> September 27, 2004</p> <p>___ \$430, Registration <b>AFTER</b> September 27, 2004</p> <p>Conference fees include Welcome Reception and Banquet.</p> <p><b>Please check boxes below to indicate your planned attendance:</b></p> <p>___ Sunday, October 3, 2004    Welcome Reception</p> <p>___ Tuesday, October 5, 2004    Banquet</p>	<p style="text-align: center;"><b><u>OPTIONAL EVENT</u></b></p> <p style="text-align: center;"><b>Boston Harbor Dinner Cruise Monday, October 4, 2004</b></p> <p>Enjoy a lovely dinner cruise along Boston Harbor. Buses will depart the hotel on Monday at 6:00 p.m. for Boston's Waterfront where you will board the James Doherty Cruise Ship for a pleasant cruise along scenic Boston Harbor while you enjoy dinner and music.</p> <p>___ \$60.00 Boston Harbor Dinner Cruise</p>
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**PAYMENT**

<p>Delegate Registration Fee: \$ _____</p> <p>Optional Event: \$ _____</p> <p style="text-align: right;">TOTAL \$ _____</p> <p>___ Payment Enclosed</p> <p>Charge my credit card:</p> <p>Visa _____    Master Card _____</p> <p>Card # _____ Exp.Date ___/___</p> <p>Name on the Card _____</p> <p>Signature _____</p>	<p><b>Make checks payable to:</b> FTA Motor Fuel Conference 2004</p> <p><b>Mail your registration form and payment to:</b> FTA Conference Massachusetts Department of Revenue 40 Southbridge Street, 3<sup>rd</sup> Floor Worcester, MA 01608 Attention: Gail Cullen</p> <p><b>Deadline for conference registration is September 27, 2004.</b> An additional fee of \$50 will be charged for registrations received after September 27, 2004. Registration fees will not be refunded for cancellations received after September 30, 2004.</p>
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**For registration assistance and questions contact:**

**Gail Cullen** – Ph. (508) 792-7300 x 22223; Fax (508) 421-2366; e-mail <culleng@dor.state.ma.us>

**Tammy Gaskell** – Ph. (508) 792-7300 x 22263; Fax (508) 421-2366; e-mail <gaskellt@dor.state.ma.us>

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OCTOBER 3-6, 2004  
QUINCY (BOSTON), MASSACHUSETTS**

**GUEST REGISTRATION FORM**

NAME:	
PREFERRED NAME (FOR BADGE):	
GUEST OF:	
MAILING ADDRESS:	
CITY, STATE, ZIP:	
TELEPHONE:	FAX:
E-MAIL ADDRESS:	

**GUEST REGISTRATION FEE SCHEDULE:**  
FTA Motor Fuel Tax Section Tax ID No. 93-0805250

**(Please check off the functions you wish to attend)**

<input type="checkbox"/> \$75.00 Sunday, October 3, 2004 Reception	<input type="checkbox"/> \$45.00 Tuesday, October 5, 2004 Tour Boston's Freedom Trail, Cambridge, Prudential Center and Newbury Street
<input type="checkbox"/> \$45.00 Monday, October 4, 2004 Tour JFK Library, USS Constitution & Shopping at Downtown Crossing	<input type="checkbox"/> \$75.00 Tuesday, October 5, 2004 Banquet
<input type="checkbox"/> \$60.00 Monday, October 4, 2004 Boston Harbor Dinner Cruise	<b>TOTAL GUEST FEES CHECKED OFF: \$ _____</b>

**PAYMENT**

<input type="checkbox"/> Payment enclosed  <b>Charge my credit card:</b> Visa _____ Master Card _____  Card # _____ Exp.Date ____/____  Name on the Card _____  Signature _____	<b>Make checks payable to:</b> FTA Motor Fuel Conference 2004  <b>Mail your registration form and payment to:</b> FTA Conference Massachusetts Department of Revenue 40 Southbridge Street, 3 <sup>rd</sup> Floor Worcester, MA 01608 Attention: Gail Cullen  <b>Deadline for conference registration is September 27, 2004.</b> An additional fee of \$50 will be charged for registrations received after September 27, 2004. Registration fees will not be refunded for cancellations received after September 30, 2004.
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