

11/5/2009

Dear Sir/Madame:

The 2010 Georgia – Alabama Crop Consultants Meeting has been set for Monday and Tuesday, February 8-9, 2010. It will be held at the Lakepoint Resort in Eufaula, AL. Rooms may be reserved at the Lakepoint Resort by calling their toll-free number 1-800-544-5253. The cost is \$69.95 per night plus tax, and reservations must be made with the resort by January 4, 2010, in order to get the group rate. Please be sure to mention that you are with the GAPAC group.

Please place a check mark beside the function(s) you plan to attend and return both pages of this letter to me.

ALL MEETING ATTENDEES:

I will attend the GAPAC/ACAA meeting and functions on the following dates:

Monday, February 8, 2010:

State Meetings (Consultants Only) 1:30 – 4:00 p.m. _____

Reception / Hospitality – 5:30 p.m. – 7:00 p.m. _____

Banquet followed by Keynote Speaker 7:00 p.m. _____

Tuesday, February 9, 2010:

Welcome and Announcements – 7:50 a.m.

Industry Updates – 8:00 a.m. _____

Break – 10:00 a.m. _____

General Session -- 10:10 a.m. - 12:00 p.m. _____

Lunch _____

Industry Updates – 1:00 p.m. – 3:00 p.m. _____

Break – 3:00 p.m. – 3:10 p.m. _____

General Session – 3:10 p.m. – 5:30 p.m. _____

Depart – Dinner on your own.

Registration for the meeting is \$50, if paid by January 25, or \$75 after January 25, 2010.

Please complete **both pages** of this letter and mail the required registration fee to:

Sheila P. Hobbs

P.O. Box 2585

Ashburn, GA 31714

If you have questions, please call:
229-567-9403 (home office) or email:

sheilahobbs@windstream.net

Be sure to visit the GAPAC website at

<http://www.georgiacropconsultants.org> for updates or changes.

We look forward to your attendance.

**2010 GAPAC/ACAA ANNUAL
MEETING
Lakepoint Resort
Eufaula, AL**

Registration Form

Pre-Registration Fee \$50 Due by January 25 - After January 25, Registration Fee \$75

Please return this form and registration fees to me by January 25, 2010.

Name _____

Spouse _____

(If spouse is attending the meeting a registration fee is required. There is no fee required for her/him to participate in meals, but we do know they will participate so we can get an accurate count for the meals.)

Company

Address

Phone # _____ Fax # _____

Email Address

Other Attendees included on this form:

Total fees attached _____

Please make your reservations responsibly.

Sheila P. Hobbs
P.O. Box 2585
Ashburn, GA 31714

If you have questions, please call:

229-567-9403 (phone and fax) or email:
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