



**\*If you are a scholarship recipient please indicate\*\*** \_\_\_\_\_Scholarship Recipient  
Scholarship recipients **must** register by **May 11, 2018**.

**\*\*If NOT a scholarship recipient\*\***

**Please attach a check payable to TSFA and mail it along with this registration form to:**

Texas State Florists' Association  
PO Box 170760  
Austin, TX 78717

**OR**

Fax: 512/834-2150  
Email: [txsfa@sbcglobal.net](mailto:txsfa@sbcglobal.net)

Credit Card Billing: \_\_\_\_\_ MasterCard \_\_\_\_\_ Visa \_\_\_\_\_ Discover \_\_\_\_\_ American Express

Card #: \_\_\_\_\_ Exp Date: \_\_\_\_\_ Code: \_\_\_\_\_