SPECIAL FORCES ASSOCIATION
CONFERENCE
2025

www.specialforcesassociation.org/sfacon-2025/

SFA# Chapter # If you are Chapter Officer, Position:

First Name: Last Name:

Address: City: State: Zip:

Phone# E-mail:

Full registration includes all days – hospitality room, lunch on Wed, and Banquet on Friday.

List member and guests for badges.

Members Name	FULL REGISTRATION	TUE	WED	THR	FRI	TOTAL
	$285	$100	$100	$100	$100	
Guest Name						
Guest Name						
Guest Name						
Guest Name						
Guest Name						
Guest Name						
						Total

To pay by check mail to ----------→
(make all check payable to the Special Forces Association)

Special Forces Association
P.O. Box 41436
Fayetteville, NC 28309-1436

HOW MANY ARE ATTENDING FRIDAY BANQUET? ☐ Pay by Check ☐

Pay by credit card: VISA ☐ M/C ☐ AMEX ☐ DISCOVER ☐

Card# EXP DATE CW CODE

Name as it appears on card

Billing Address if different than above

SIGNATURE

Orleans Hotel & Casino: Reservations by telephone: Call 800-675-3267 and reference group code: SFAJ25C. Reservations must be made on or before 9/12/2025

QUESTIONS? Contact the Registrar, Bonnie Cooper, (561) 543-9562 or coop553@bellsouth.net