



IARFC 2024 National Financial Plan Competition

Participation Agreement / Registration Information

Please Print

University Name _____ Dept. _____

Faculty Advisor/Competition Liaison _____

Position/Title _____

Address _____

Email _____ Phone/Ext _____

Department Website _____

Signature _____ Date _____

Registration Information

Fee: \$50 (USD) per student/team (More than 5 students/teams contact the IARFC for more options)

Number of Participants: Student(s) _____ Team(s) (individual or team of 2) _____

Total \$ _____ **USD**

Check (payable to IARFC) American Express Visa MasterCard Discover

Cardholder Name _____

Billing Address _____

Credit Card No. _____ **Exp. Date** _____ **Security Code** _____

Cardholder Signature _____

* Any student or professor, by virtue of their participation in the competition, grants implied consent for the IARFC to use photos or videos in all media coverage areas.

Completed Participation Agreement and Registration Fee due by October 16, 2023.

Registration fees are non-refundable

Submit by Fax – (513) 345-9479, Email – plancomp@iarfc.org, or Mail to –
IARFC, National Financial Plan Competition, PO Box 506 Middletown, Ohio 45042-0506