



Illinois Association of County Clerks and Recorders

Annual Conference

September 22 – 25, 2019

Wyndham - Springfield, IL 62703

Registration Form

Name: _____

County: _____

Office (Circle One): Clerk/Recorder Clerk Recorder Other: _____

Additional Attendees (Name and Title)

E-Mail: _____ Phone #: _____

Registration Fee is \$70 per person and is required for attendance.

Number of Attendees _____ X \$70 = _____

Make Checks payable to IACCR and send to:

Steve Fox

IACCR Treasurer/ Marion County Clerk

P.O. Box 637

Salem, IL 62881