



Annual Meeting Registration Form

Saturday, January 25, 2025
The Grappone Conference Center
70 Constitution Ave, Concord, NH 03264

Please print clearly.

Name _____

Sugarhouse Name _____

Address _____

E-mail _____

Phone _____

Names of Additional Attendees _____

x \$10.00/ticket =

of tickets

Amount due

Payment:

Check payments: make payable to NHMPA.

Mail to: NHMPA c/o Christa Campbell, PO Box 24, Greenwich, NY 12834

Credit card payment accepted online at <https://nhmapleproducers.com/shop/>

Meeting questions, Email: newhampshiremapleproducers@gmail.com