

REGISTRATION FORM

Personal Information

Full name (last, first):		
Title:		
Email:	Phone:	
Emergency contact:		
Business Information		
Business name:		
business nume.		
Street address (if different).		
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Mailing address:		
C		

Return form to Beckie Cromer with the Nebraska Secretary of State's Office by mail or email by COB on Sept. 1, 2025. Please carefully review <u>travel advisories</u> for Egypt on the U.S. State Department website before registering to participate.



Beckie Cromer

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