

Conference Registration Form

FEES: Please check which days attending

Days	Early Bird Rate (Postmarked by 1/31/12)	On-Site Rate (After 1/31/12) <small>Accepted at Civic Center Only</small>
Pre-Conference Seminars:		
<input type="checkbox"/> Nutrition and Feeding Interventions	\$100	Must be registered in advance
<input type="checkbox"/> SI for EI	\$300	Must be registered in advance
General Conference Seminars:		
<input type="checkbox"/> All Three Days	\$225	\$275
<input type="checkbox"/> Any Two Days	\$150	\$200
<input type="checkbox"/> Any One Day	\$75	\$125

Workshop Selections: You MUST indicate 3 choices

Choice: Please fill in the number next to the letter	Pre- Conference Seminars	Wednesday 9 am-4 pm (A1-A7)	Thursday 10:30 am- 12 noon (B1-B14)	Thursday 1:30-4:30 pm (C1-C14)	Friday 10:30 am- 12 noon (D1-D14)	Friday 1:30-3 pm (E1-E14)
FIRST		A	B	C	D	E
SECOND		A	B	C	D	E
THIRD		A	B	C	D	E

Payment method

My payment method is:	Personal Check	Agency Check	Purchase Order	Money Order	Credit Card
Please fill in check # or PO # in the appropriate space	Check #	Check #	PO#	Check#	Type (circle one) Visa MC Discover AmEx (see below)

Credit Card Information:

Name on Card: _____ Card #: _____
 Billing Address and Zip: _____
 Exp. Date: _____ Security Code: _____ Signature: _____