Family Involvement Conference Registration

October 14-17, 2018

Best Western Premier the Central Hotel and Conference Center Harrisburg, PA

Please complete this form and mail, email, or fax it to: Paul Rinaldi, 509 Newlins Road West, Easton, PA 18040. Email paulfrinaldi@gmail.com Telephone (610) 250-9455 Fax 610 438-0285

Name: (Dr. Mr. M	rs. Ms.)	Job Title:	
City:		State:	Zip:
Phone:	Fax:	E-mail:	
]	Registration Fees	
ndividual Rate (attending the	entire conference)	Number attending X \$210.	00 each = \$
Froup Rate (five or more peo- onference and registering as <u>registration form for each magnetic and people as the people as t</u>	a group. <u>Separate</u>	Number attending X \$180.	00 each = \$
Day Attendees (per day) includes lunch lease circle the day/s you will be attending: unday Monday Tuesday Wednesday		Number attending X \$125.00 each = \$	
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- Registration fees are not refundable, but are transferable.
- Purchase orders are welcome, but must be accompanied with a check or money order.
- The Family Involvement Conference can serve as "Professional Development" hours. Ask your director to submit them for you.
- The fees stated are for conference registration and meals only. **They do not** include the cost of hotel registration.
- Please make checks payable to: Family Involvement Conference.