

Conference Registration

Family Involvement Conference
Best Western Premier *the* Central Hotel and Conference Center
Harrisburg, PA
October 27-30, 2019

Please print or type the information below: Mail, email or fax the completed form to: Family Involvement Conference
C/O Paul Rinaldi, 509 Newlins Road West, Easton, PA 18040. Telephone: (610) 250-9455. Fax: (610) 438-0285
Email: paulfrinaldi@gmail.com

Name: (Dr. Mr. Mrs. Ms.) _____ Title: _____
Organization: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____ Fax: _____ E-mail: _____

Registration Fees

	<u>Number</u>		<u>Amount</u>
Individual Rate with Meals (attending the entire conference)	_____	X \$450.00 each	_____
Individual Rate without Meals (attending the entire conference)	_____	X \$220.00 each	_____
Group Rate with Meals (five or more people attending entire Conference and all registering as a group. <u>Separate Registration Form for each member of the group</u>)	_____	X \$425.00 each	_____
Group Rate without Meals (five or more people attending entire Conference and all registering as a group. <u>Separate Registration Form for each member of the group</u>)	_____	X \$180.00 each	_____
Day Attendees (per day) includes lunch Please check/click the day/s you will be attending: <input type="checkbox"/> Sunday <input type="checkbox"/> Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday	_____	X \$135.00 each	_____

Meal Options

Option 1: Meals for the entire conference beginning with dinner on Sunday evening and ending with lunch on Wednesday

	<u>Number</u>		<u>Amount</u>
	_____	X \$262.50 each	_____

Option 2: Select the meals you are interested in purchasing

_____ Sunday dinner \$39.50	_____ Monday Breakfast \$20.50	_____ Tuesday Breakfast \$20.50	_____ Wednesday Breakfast \$20.50
	_____ Monday Lunch \$27.50	_____ Tuesday Lunch \$27.50	_____ Wednesday Lunch \$27.50
	_____ Monday Dinner \$39.50	_____ Tuesday Dinner \$39.50	

Amount: _____

If paying by credit card, please provide the following information:

Card Number: _____ Expiration Date: _____ SSV Number: _____
Cardholders Signature: _____ Billing zip code: _____

Please note:

- Registration fees are not refundable, but may be transferred.
- Purchase orders are welcome, but must be accompanied with a check or money order.
- The Family involvement Conference may 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.**
- Make checks payable to: Family Involvement Conference.