



2008 CAEZ TRAINING CONFERENCE

“Rend-EZ-Vous on the Queen Mary!”

REGISTRATION FORM



First Name: Last: Name for Badge:

Title:

Organization:

Address:

City: State: Zip:

Email: (indicate none if you have no email address)

Telephone:

Guest:

PLEASE COMPLETE THE FOLLOWING TO HELP US PLAN YOUR ATTENDANCE
(check all that apply)

- I will attend Wednesday’s Reception Event
- I will bring a guest to Wednesday’s Reception Event
- I will take the “Behind the Scenes” Queen Mary Tour
- I will bring a guest to the “Behind the Scenes” Queen Mary Tour
- I will attend Thursday’s Luncheon
- I will bring a guest to Thursday’s Luncheon
- I will attend Thursday’s Reception Event
- I will bring a guest to Thursday’s Reception Event



**Registration fee includes all conference sessions, meals
and all receptions**

Registration Fees

<input type="checkbox"/> CAEZ Member	\$395.00
<input type="checkbox"/> Non-member	\$495.00
<input type="checkbox"/> Non-member - Includes '08 - '09 CAEZ Active Membership (a \$150 savings- new members only - restricted to EZ Managers)	\$645.00
<input type="checkbox"/> Non-member - Includes '08 - '09 CAEZ Associate Membership (a \$150 savings- new members only)	\$545.00
<input type="checkbox"/> Behind the Scenes Queen Mary Tour - (Please circle preferred tour time: 5:00, 5:30, 6:00, 6:30)	\$15.00
<input type="checkbox"/> Guest - Behind the Scenes Queen Mary Tour	\$15.00
<input type="checkbox"/> Guest - Wednesday Reception	\$30.00
<input type="checkbox"/> Guest - Thursday Luncheon	\$25.00
<input type="checkbox"/> Guest - Thursday Reception	\$25.00
<input type="checkbox"/> I am a Speaker	
<input type="checkbox"/> I am a Sponsor	
<input type="checkbox"/> I am a Moderator	
<input type="checkbox"/> I am a Board Member / Advisor	

SELECT PAYMENT METHOD

Credit Card

Visa

Mastercard

American Express

Check

Please make check payable to: CAEZ

Mail check to:

Mary Hansen, CAEZ Treasurer

Yuba County Airport

1364 Sky Harbor Dr.

Olivehurst, CA 95961

Name on Card: _____

Card Number: _____

Exp Date: _____ Security Code: _____

Billing Address: _____

City: _____ State: _____ ZIP: _____

If you have any problems or prefer to provide your credit card information by telephone, please contact Mary Hansen, CAEZ Treasurer, at mhansen@syix.com or (530) 741-6463.

CANCELLATION/REFUND POLICY

Cancellation requests postmarked, faxed or emailed 30 days prior to the first day of the event will receive a full refund. Cancellation requests received 15 days prior to the first day of the event will receive a 50% refund.

**IF CANCELLING LESS THAN FIFTEEN DAYS PRIOR TO THE EVENT THERE WILL BE
NO REFUND GIVEN.**