



Conference Registration Form (Sponsor)

2008 CCUMC Annual Conference
October 2-6, 2008
Lawrence, Kansas

Complimentary Attendee #1:

NAME: _____ BADGE NAME: _____

INSTITUTION/ORGANIZATION: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

EMAIL: _____ PHONE: _____ FAX: _____

_____ Special needs/ assistance needed (please describe) _____

_____ Special meal requirements (please describe) _____

Complimentary Attendee #2 (if applicable):

NAME: _____ BADGE NAME: _____

INSTITUTION/ORGANIZATION: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

EMAIL: _____ PHONE: _____ FAX: _____

_____ Special needs/ assistance needed (please describe) _____

_____ Special meal requirements (please describe) _____

ADDITIONAL INFORMATION

Additional attendees: If your company would like to register additional attendees that go beyond the sponsorship level, please download the conference registration form online (<http://ccumc.org/conferences-and-events/registration-form>) and submit to CCUMC Executive Office.

Lodging information: SpringHill Suites Lawrence, (785) 841-2700, Booking code: ccuccub or ccuccua, cut-off date: 9/2/08
Eldridge Hotel, (785) 749-5011, Booking code: KU CCUMC, cut-off date: 9/2/08

Reservations made after the cut-off date will NOT receive the CCUMC conference rate.

Disclaimer: By registering for this event, you recognize that conference presentations and sessions may be recorded.

Questions or Concerns:

CCUMC Executive Office
601 E. Kirkwood Ave., Franklin Hall 0009, Indiana University
Bloomington, IN 47405-1223
P: (812) 855-6049 Fax: (812) 855-2103
ccumc@ccumc.org

For Office Use Only:

Received: _____
Entered: _____
Receipt: _____
CK #: _____