

# REGISTRATION INFORMATION

## REGISTRATION FEES **EARLY BIRD REGISTRATION ENDS AUGUST 15, 2019**

Because of the generosity of our Corporate Sponsors and Conference Underwriters, a modest registration fee for the Conference allows all-inclusive pricing options. Please indicate your selection below.

**Single Occupancy All Inclusive** (includes 2 nights lodging, 5 meals and conference registration)

\$599 each (Early Bird through 8/15/19)       \$749 each (Regular Conference Rate)

**Double Occupancy All Inclusive** (includes 2 nights lodging, 5 meals and conference registration)

\$499 each (Early Bird through 8/15/19)       \$649 each (Regular Conference Rate)

**Commuter** (includes conference registration and Thursday lunch)

\$369 each (Early Bird through 8/15/19)       \$519 each (Regular Conference Rate)

\$76 each **Meal Package Option for Commuters** (includes all conference meals)

**1-Day, Thursday** (includes morning and afternoon conference sessions and lunch)

\$179 each (Early Bird through 8/15/19)       \$229 each (Regular Conference Rate)

\*\*\**(10.00 CEU hours or 1.00 CEU Credits for conference)*\*\*\*

Conference Contact: Brent Gibson Phone: (334) 844-5100 • Fax: (334) 844-3101 • Email: [brent.gibson@auburn.edu](mailto:brent.gibson@auburn.edu)

# CONFERENCE REGISTRATION FORM

**WEDNESDAY, OCTOBER 2– FRIDAY, OCTOBER 4, 2019**

\*Mr./ Ms Preferred Name For Badge (First Name, MI, Last Name): \_\_\_\_\_

Title: \_\_\_\_\_ Company: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City State Zip+4: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Company Contact's Name: \_\_\_\_\_ Contact's Job Title: \_\_\_\_\_

Contact's Address (if different): \_\_\_\_\_ City State Zip+4: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

\*Retired: Yes No If Yes, Company: \_\_\_\_\_

Job Title at Retirement: \_\_\_\_\_

Year(s) you previously attended our annual conferences: \_\_\_\_\_

\*\* If Registering a Spouse\*\* Spouses attending Spouses attending conference sessions and/or breakout sessions must register for conference.

Spouse's Preferred Name for Badge: \_\_\_\_\_

### PAYMENT PROCESSING:

\$ \_\_\_\_\_ Conference

\$ \_\_\_\_\_ Total

Checks should be made payable to **BLUE RIDGE CONFERENCE ON LEADERSHIP** and mailed to the address above.

Credit Card (Circle One):    MC    VISA    Discover    American Express

\_\_\_\_\_ Credit Card Number

\_\_\_\_\_ Verification #    \_\_\_\_\_ Exp. Date

\_\_\_\_\_ Signature

### Mailing Address for Registration and Payment:

Blue Ridge Conference on Leadership  
301 O.D. Smith Hall  
135 South College Street  
Auburn University, AL 36849-5608

Prepayment is required. No-shows and cancellations less than thirty business days before the Conference are responsible for the registration cost. Substitutions may be made at any time. Please email or fax us with changes or substitutions.