



NYSBOC Central Chapter

Registration Form - 2008

Student Last Name	First Name
<input type="text"/>	<input type="text"/>

Student Street Address	City	State	Zip
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Telephone (Home)	Business
<input type="text"/>	<input type="text"/>

Student E-Mail Address (Please Print)

Student Title

Student Training ID# (**DO NOT INCLUDE SOCIAL SECURITY NUMBER**)

Students Primary Agency#	Appointment Date
<input type="text"/>	<input type="text"/>

Students Primary Agency Name

Students Secondary Agency	Appointment Date
<input type="text"/>	<input type="text"/>

Students Secondary Agency Name

Registration Information

- Full Conference (3 1/2 Days) \$350.00
- Day 1 Only \$150.00
- Day 2 Only \$150.00
- Day 3 Only \$150.00
- Day 4 (1/2 Day) \$100.00

TOTAL AMOUNT ENCLOSED \$ _____

DEADLINE: 4/4/2008+

For questions please e-mail Cindy Heid at cheid@townofclay.org or 315-652-3800 x 152
 FAX 315-622-7259 (Attention Cindy or Terry)

MAKE CHECKS PAYABLE TO: CENTRAL CHAPTER N.Y.S.B.O.C INC.
Submit registration and form fee to: Cindy Heid / Planning & Development
Town of Clay - 4401 State Route 31, Clay, NY 13041