NYSBOC Central Chapter

2012 Educational Conference Registration Form

(You are encouraged to register online at www.nysboc.com)

Student Last Name	First Name	MI	Suffix (Jr./Sr.)

Student Training ID# (DO NOT USE SOCIAL SECURITY NUMBER)

N	Y							

Official Mailing Address Line 1

Official Mailing Address Line 2

Mailing City | State | Mailing Zip

E-Mail Address | Phone (INCLUDE AREA CODE)

NYSBOC Chapter you are a Member of:

Primary Agency or Business Name: | Agency #: | County:

Student Title: | Appointment Date: (MMYY)

Registration Information:

☐ Full Conference (3 ½ Days) .....[April 3-6, 2012] $350.00

Or choose one or more single days:

☐ Day 1 Only .....[April 3] $150.00

☐ Day 2 Only .....[April 4] $150.00

☐ Day 3 Only .....[April 5] $150.00

☐ Day 4 (1/2 Day).....[April 6] $100.00

TOTAL AMOUNT ENCLOSED ……..……. $_____

Attending Vendor Reception on Tuesday (y/n) _____

REGISTRATION DEADLINE: March 30, 2012.

DEADLINE TO CANCEL AND RECEIVE A REFUND: March 20, 2012

Training questions please e-mail Jason Perkins, jperkins@salina.ny.us
Registration questions please contact Bill Reagan, breagan@marcellusny.com, 315-727-1646

MAKE CHECKS PAYABLE TO: ***CENTRAL CHAPTER NYSBOC INC.***

Submit registration form and fee to: **Bill Reagan**
FAX: 315-673-9132 **PO Box 90**
Marcellus, NY 13108