



# April 22 – 24, 2005

Request the special CCEA Conference rate:

## 2005 CCEA Conference

(California Continuation High School Conference)

**The Doubletree Hotel**  
**2001 Point West Way**  
**Sacramento CA**  
**Special rate: \$110.**  
**916.929.8855**

**CONFERENCE REGISTRATION MAY BE FUNDED OUT OF MOST CATEGORICAL MONEYS FOR STAFF DEVELOPMENT TO ALIGN WITH NCLB!**

You may register online or return  
 this form to: Jim Caswell:  
 jcaswell@khsd.k12.ca.us

NuevaHigh School  
 8600 Palm Drive • Lamont, CA 93241  
 Phone: 661-8451532 Fax: 661-845-9523

- \$250 **CCEA Member (Professional)** Full 3-Day Registration includes Friday dinner, Saturday lunch, Sunday brunch Membership # \_\_\_\_\_
- \$265 **CCEA Member (School)** Full 3-Day Registration includes Friday dinner, Saturday lunch, Sunday brunch Name of School \_\_\_\_\_
- \$225 **CCEA Member (Professional)** 2-Day Registration includes Saturday lunch and Sunday brunch.
- \$240 **CCEA Member (School)** 2-Day Registration includes Saturday lunch and Sunday brunch Name of School \_\_\_\_\_
- \$300 **Non-Members** 3-Day Registration includes Friday dinner, Saturday lunch, Sunday brunch.
- \$270 **Non-Members** 2-Day Registration includes Saturday lunch and Sunday brunch.
- \$ 50 **Late registration fee following Friday, March 11, 2005**

Deadline extended to April 8, 2005

• University credit may be available. Check at the conference registration table for information.

As a conference attendee, please provide my meals as vegetarian

Guest meals:  
 \_\_\_ Dinner @ \$50.00 \_\_\_ Lunch: @ \$30.00 \_\_\_ Brunch @ \$25.00

Vegetarian meals:  
 \_\_\_ Dinner @ \$50.00 \_\_\_ Lunch: @ \$30.00 \_\_\_ Brunch @ \$25.00

Guest meals fee	\$ _____
Late registration fee	\$ _____
Registration fee	\$ _____
<b>Total amount</b>	<b>\$ _____</b>

Retired members deduct \$100 from registration fee.

Check # \_\_\_\_\_ P.O. # \_\_\_\_\_ Please include a copy P.O.

Credit Card:

Name \_\_\_\_\_

# \_\_\_\_\_ Ex. Date: \_\_\_\_\_

Check one:

Visa  Master Card  American Express  Discover Card

Printed Signature: \_\_\_\_\_

Signature: \_\_\_\_\_

Registration Information:

Name \_\_\_\_\_

District/School Name \_\_\_\_\_

District/School Address \_\_\_\_\_

District/School Phone: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Fax # \_\_\_\_\_

Email Address \_\_\_\_\_

CCEA District (circle one):

I II III IV V VI VII VIII IX X XI XII

