

April 27-29, 2007

## 2007 CCEA State Conference

Sheraton Grand Hotel

1230 J Street

13<sup>th</sup> and J Street

Sacramento, CA

(916) 447-1700

(916) 447-1701 Fax

Conference Registration Qualifies for Most Categorical Moneys for Staff Development and is Aligned with NCLB Mandates!

<input type="checkbox"/>	\$250 CCEA Member (Professional) Full 3-day Registration includes Friday, Saturday, Sunday meals, Member # _____
<input type="checkbox"/>	\$265 CCEA Member (School) Full 3-day Registration includes Friday, Saturday, Sunday meals, Name of School _____
<input type="checkbox"/>	\$225 CCEA Member (Professional) 2-day Registration includes Saturday and Sunday meals, Member # _____
<input type="checkbox"/>	\$240 CCEA Member (School) 2-day Registration includes Saturday and Sunday meals, Name of School _____
<input type="checkbox"/>	\$300 Non-Member 3-day Registration includes Friday, Saturday, Sunday meals
<input type="checkbox"/>	\$270 Non-Member 2-day Registration includes Saturday, Sunday meals
<input type="checkbox"/>	\$50 Late registration for all registration received after April 14, 2007

University Credit will be available – Check at registration table

<input type="checkbox"/>	I request Vegetarian Meals	Check # _____	P.O. # _____	Please include copy of P.O.
Guest Meals:		Credit Card Information:		
_____ Dinner @ \$55.00	_____ Lunch @ \$35.00	_____ Brunch @ \$30.00	Name _____	
Guest Vegetarian Meals:		Card # _____		
_____ Dinner @ \$55.00	_____ Lunch @ \$35.00	_____ Brunch @ \$30.00	Expiration Date _____	
		Card Verification Value _____		
		____ Visa ____ Master Card ____ American Express ____ Discover		
		Name as it reads on card _____		
Registration Information:				
Name _____		District/ School Name _____		
District/School Address _____		Telephone # _____		
Home Telephone # _____		Fax # _____		
		Email Address _____		
CCEA District: I II III IV V VI VII VIII IX X XI XII				
Guest Meals		<b>Retired Members: Deduct \$100 from Registration Fee</b>		
Late Registration Fee	\$ _____	Register online at <a href="http://www.cceanet.org">www.cceanet.org</a>		
Registration Fee	\$ _____	OR		
<b>Total Amount</b>	\$ _____	Mail to: Jim Caswell		
		14915 Vista Grande Drive, Bakersfield, CA 93306		
		Fax: 661-845-9523 Phone: 661-871-5472		
		Email: <a href="mailto:jcaswell@bak.rr.com">jcaswell@bak.rr.com</a>		

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