

Registrant Information

Name: _____
 Address: _____
 City, State, ZIP: _____
 Phone: _____ Email: _____
 Guild Name: _____

I would like to volunteer to help with some of the many jobs that need doing during the conference, such as booth sitting and helping at the Registration/Information Desk. Please have the Volunteer Coordinator contact me.

I have special needs. Please specify. _____
 I would like to be a Class or Workshop Angel Volunteer for class or workshop # _____
 Check if this is your first CNCH Conference.

Class and Workshop Choices

If you register online you will have immediate confirmation of your class or workshop choices.
If you are registering by mail please check the CNCH website for class availability, but be aware that website updates may run slightly behind.

CLASS CHOICES: Nine hours of classes come with your registration. Extra hours are priced in 3-hour segments.

	Friday AM	Class Length	Friday PM	Class Length	Saturday AM	Class Length	Saturday PM	Class Length	Sunday AM	Class Length
First Choice Class Selection	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
Second Choice Class Selection	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
Third Choice Class Selection	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____

If you are selecting additional class time include that information above, and remember to include the additional cost in the **Registration Costs** section below. Additional class time is priced per 3-hour segment so if you choose an additional 3 hours you will pay an additional \$65.00 (or \$75.00 after 01/31/10). If you are registering by mail, the Registrar will contact you if there is a conflict or other problem with your class selection.

WORKSHOP CHOICE: 15 Hours (use workshop number) **First Choice** _____ **Second Choice** _____ **Third Choice** _____

Registration Costs

	Early Bird Price	Price After 01/31/10	How Many	Total
Class Registration	\$260.00	\$285.00	_____	\$ _____
Workshop Registration	\$375.00	\$400.00	_____	\$ _____
Mini Registration	\$135.00	\$160.00	_____	\$ _____
CNCH Assoc. Membership (see pg. 12)	\$30.00	\$30.00	_____	\$ _____
Additional Fashion Show Ticket	\$45.00	\$45.00	_____	\$ _____
Additional Keynote Address and Banquet Ticket (purchase by March 15)	\$60.00	\$60.00	_____	\$ _____
Additional Class Hours priced in 3-hour segments	\$65.00	\$75.00	_____	\$ _____
			Grand Total	\$ _____
Banquet Entrée Selection	<input type="checkbox"/> Chicken	<input type="checkbox"/> How Many	<input type="checkbox"/> Vegetarian	<input type="checkbox"/> How Many

*** This Registration Form is not complete without the second page. ***

Payment Information

(Online registration and payment is available at www.cnch.org)

Check **Make check payable to CNCH 2010**

Credit Card VISA MasterCard

Card Number: _____

Name on Card (please print): _____

Expiration Date: _____

Verification Code (the three or four numbers on the signature side of your card): _____

Mail this form and payment to:

CNCH 2010 Registrar
441 Conil Way, Portola Valley, CA 94028
cnch10reg@gmail.com

Send a SASE or include your email address to receive confirmation of registration if you are registering by mail.

Suggestion: keep a copy of this completed form. This form can be downloaded at www.cnch.org

A full refund minus a \$25 administration fee will be made until March 1, 2010.

Sorry, there are no refunds for cancellations made after that date. All refunds will be sent after the conference.