

Cambio de Colores Registration Form

March 13 – 15, 2002

Please print or type. Form may be copied for more attendees.

Name (First/Last) _____ Name for Badge _____

Organization _____ Organization Address _____

City _____ State _____ Zip _____

Daytime Phone: _____ Fax: _____

Email Address: _____

Registration Fees:

Conference Registration	\$100	\$ _____
Late fee after February 20	\$25	\$ _____
Justice — May 14 (3.0 CLE program)	\$85	\$ _____
Late fee after February 20	\$25	\$ _____
Parking Hang Tag (\$2 per day)	___ days x \$ 2	\$ _____
CLE processing fee (if attending 3 days)	\$20	\$ _____
Extra Banquet Ticket (Day 1)	___ x \$20 each	\$ _____
Extra Banquet Ticket (Day 2)	___ x \$20 each	\$ _____

Concurrent Sessions (A-I) Choose one:

A B C D E F G H I

Do we have permission to include on a roster your name, organization address, and e-mail? yes no

Methods of Payment:

Check enclosed in the amount of \$ _____ (Made payable to University of Missouri)

Mail to: Cambio de Colores
MU Conference Office
348 Hearnes Center
Columbia, MO 65211

Purchase Order: (a hard copy must accompany registration form)

ISE (For University employees only): Department Name _____

MO Code _____ Account Value _____

Credit Card: MasterCard Visa Discover

Credit Card Number _____ Expiration Date _____

Card Holder Name (please print) _____

Authorized Signature _____

Address if different than registrant _____

Registration Questions?

Contact Lucy St. John, Assistant Conference Coordinator at (573) 882- 2301 or stjohnl@missouri.edu

For Office Use Only <37422>

Customer ID # _____ Receipt # _____