



Central California Chapter WESTOP

2009 PDS Registration Form

Personal Information

PLEASE COMPLETE FORM FOR EACH PARTICIPANT

Name: _____
 Job Title: _____
 Program: _____
 Institution: _____
 E-mail: _____

Address: _____
 City: _____
 State: _____
 Zip Code: _____
 Phone: _____

Please indicate if you are a New Member of WESTOP

- YES
 NO

October 8 & 9, 2009
 CSU Fresno

Registration Fees

Before September 18, 2009

September 19th to October 7, 2009

- \$150.00 Paid Member
 \$175.00 Non Member
 \$25.00 Student

- \$200.00 Paid Member
 \$225.00 Non Member
 \$25.00 Student

On Site Registration

- \$250.00 Paid Member
 \$275.00 Non Member

Payment

- Check (Payable to WESTOP-Central Cal Chapter)
 Purchase Order (Attach to Registration Form)

Submit with Electronic Signature

Full Name: _____

Date: _____

Please submit completed form to:
 Norma Cuevas-Upward Bound-CSU Fresno
 5240 N.Jackson Ave M/S UC 35 Fresno, CA 93740
 Office: 559-278-5796 - FAX: 559-278-4306
 E-mail: ncuevas@csufresno.edu



Registration Use ONLY

Received by: _____ Postmarked Date: _____ Paid in Full: _____