

# 2010 LLL Ohio Area Conference Registration Form (front)

Print names as you wish them to appear on your nametag.

Name (Last, First) \_\_\_\_\_  
 Address \_\_\_\_\_  
 City, State, Zip \_\_\_\_\_  
 Phone Number (home) \_\_\_\_\_ (Cell) \_\_\_\_\_  
 Email Address \_\_\_\_\_

**Others Attending (if more space is required, please use bottom of this page)**

Adult Name (Last, First) \_\_\_\_\_  
 Child Name (Last, First) \_\_\_\_\_ Age \_\_\_\_\_  
 Child Name (Last, First) \_\_\_\_\_ Age \_\_\_\_\_  
 Child Name (Last, First) \_\_\_\_\_ Age \_\_\_\_\_

Please indicate if any attending have a disability and need special accommodations (Include name(s) and need(s))  
 \_\_\_\_\_

**Indicate the events you will be attending during the conference:**

**Friday:** Evening Banquet and Presentation (one price for both events)

Adults: \$27.50 # Adults \_\_\_\_\_ Total Adult = \$ \_\_\_\_\_  
 Children: \$19.50 # Children \_\_\_\_\_ Total Children = \$ \_\_\_\_\_  
 Total Number of Vegetarian Meals: \_\_\_\_\_

**Friday:** Evening Presentation Only

Adults: \$10.00\* # Adults \_\_\_\_\_ Total Adult = \$ \_\_\_\_\_  
 \* Price when tickets are purchased with full conference registration.  
 Adults alone, without conference registration: \$15  
 Children under 15 are FREE; # Children: \_\_\_\_\_

**Saturday:** Conference Topics — Indicate topic preferences by entering topic number

	Primary Registrant		Additional Adult Attendee	
	1st Choice	2nd Choice	1st Choice	2nd Choice
Session 1	_____	_____	_____	_____
Session 2	_____	_____	_____	_____
Session 3	_____	_____	_____	_____
Session 4	_____	_____	_____	_____

Total Registration = \$ 60

**Saturday:** Children's Topics—If your children are attending any of the Children's Topics (topic numbers 110, 210, 310, 410), please provide the following information:

Name of Accompanying Adult: \_\_\_\_\_  
 Number of Children Attending: \_\_\_\_\_ Ages \_\_\_\_\_

*Please do not sign up for topics unless you plan on attending. If you do not attend, you may displace others who want to attend. Topics have a limited number of seats available.*

No Additional Fee for Children's Topics with  
 One Paid Adult Conference Attendee

**Subtotal =** \_\_\_\_\_

*Registration Continues on Back*

PLEASE PRINT! Please read Registration Brochure completely before completing this form.

**Information About You and Others Attending**

**Conference Events**



## 2010 Registration Form (back)

Conference Events (cont'd)

**Total from First Side:** \_\_\_\_\_

**Saturday: Lunch**

Adults: \$21.00 # Adults \_\_\_\_\_ Total Adult = \$ \_\_\_\_\_

Children: \$14.50 # Children \_\_\_\_\_ Total Children = \$ \_\_\_\_\_

Total Number of Vegetarian/Vegan Meals: \_\_\_\_\_

**Saturday: Family Pajama Party**

Family: \$15.00 (adult(s) + children) Family = \$ \_\_\_\_\_

Adults: \$10.00 #Adults \_\_\_\_\_ Total Adult = \$ \_\_\_\_\_

**Communication Skills Enrichment Sessions (Friday Morning and Afternoon)**

	LLL Member	Non-Member	
CSE	\$10 x _____	\$25 x _____	Total CSE = \$ _____

**Volunteering**

I am willing to volunteer for: (See page 11 for more information)

Friday Registration     Saturday Registration

Topic Aide             Boutique

Where needed

Please circle the session(s) you are willing to miss to volunteer:

Saturday: Session 1   Session 2   Session 3   Session 4

**Additional Fees (If Applicable)**

LLL Membership: \$40 \_\_\_\_\_

*Join today and save \$10 on your registration!*

Late Fee (after April 19, 2010): \$10 \_\_\_\_\_

Donate to LLL (must be received by April 9, 2010):

List a tribute to someone you love or admire for a \$10 donation. \$10 \_\_\_\_\_

List names of your LLL children for a \$1 donation for each child. \$1 x (# children) \_\_\_\_\_ = \_\_\_\_\_

*Use the space at the bottom of this registration form to write your message or list children's names.*

Additional Fees and Discounts

**Discounts**

I am an... (choose one)

LLL Member ... subtract \$10 \_\_\_\_\_

LLL Leader... subtract \$35 \_\_\_\_\_

I am a Topic Presenter... subtract \$10 \_\_\_\_\_

Voucher Code/Amount: \_\_\_\_\_

Total Registration, Fees, and Discounts: \$ \_\_\_\_\_

Payment Information

**Payment Information**

Check payable to LLL Ohio

Credit Card—Please provide the following information:

Name on the card: \_\_\_\_\_

Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ 3-Digit Verification Code: \_\_\_\_\_

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

**Tribute Messages and/or children's names to be listed in conference program (use additional sheet if needed):**

Please read Registration Brochure completely before completing this form. PLEASE PRINT!

