California Reading Association **2008 REGISTRATION FORM**

42nd Annual Conference – Sacramento, CA October 16 – 18, 2008 *"Comprehension…A Key To Many Doors"*

PLEASE TYPE OR PRINT CLEARLY

First Name _____ Last Name _____

Home Address _____ City _____

State _____ Zip Code _____ Home Phone ( ) _____

Work Phone ( ) _____ Email Address _____

For Conference Name Badge: School District/Affiliation _____

PLEASE MARK YOUR SELECTIONS BELOW AND TOTAL PRICES AT BOTTOM

☐ **I want to join CRA (and register as a member)**……. **$ 30** $_____

Full 3 DAY CONFERENCE PASS–includes Exhibits, General Sessions, Sessions/Workshops ONLY.
CRA Publication Sessions, CYRM Dinner may be purchased at an additional cost. See Additional Tickets below.

☐ Member…….... $285 ☐ Group (20 or more)…. $150
☐ Non Member…….. $335 ☐ Student…..…….. $75 $ _____

ONE DAY ONLY CONFERENCE PASS-*Fees are good for ONE DAY ONLY* – You must mark the day you will attend below. One Day Pass includes Exhibits, Sessions/ Workshops only for the day you will be attending. *CRA Publication Sessions & the CYRM Dinner may be purchased at an additional cost. See Additional Tickets below.*

MARK THE DAY YOU WILL ATTEND ☐ **Thursday** ☐ **Friday** ☐ **Saturday**

☐ Member ……. $150 ☐ Group (20 or more)…. $75
☐ Non Member ……. $200 ☐ Student…… $50 $_____

ADDITIONAL TICKETS - *Check each one you wish to attend & add the appropriate amount to the price of Conference Registration Fee above.*

☐ **CRA Publication Sessions** ☐ **P-1** @ $12 *Thursday, 10/16/08* ☐ **P-2** @ $15 *Friday, 10/17/08* $ _____

☐ **CYRM Dinner** *(Friday, 10/17/08, 7:30 pm – 10:00 pm)*……@ $ 55 x _____ ticket(s) = $ _____

PAYMENT INFORMATION

- *FAX registration form with credit card information to* **714 - 435-0269**
- *MAIL registration form with payment, payable to*

California Reading Association
3186 D-1 Airway ▪ Costa Mesa, CA 92626
Phone: 714-435-1983 ▪ Fax: 714-435-0269 ▪ www.californiareads.org

__ **Check Enclosed** (payment in full required) Ck. #_____

___ **Purchase Order Enclosed.** PO #_____
You must attach the purchase order to your registration form.
No requisitions will be accepted.

___ **Credit Card** Please bill my credit card. We accept VISA, MasterCard, Discover, American Express
Credit Card # _____ Exp.Date_____

Name on Card:_____

Total prior to Sept. 4, 2008 $ _____

Total after Sept. 4, 2008 - ADD $25 $ _____

CANCELLATIONS & CONFIRMATIONS:
Cancellation: All cancellations must be received in writing by September 4, 2008. Cancellations received after September 4, 2008 are non-refundable. NO EXCEPTIONS!
Confirmation: All conference registrants will receive a confirmation postcard via mail after September 4, 2008. Bring this card to conference. All registration materials, including your name badge may be picked up on site.
Registration DEADLINE: All registration forms must be received in the CRA office by October 7, 2008 in order to be processed before the conference begins. **After this date, only on-site registrations will be accepted. If registering on-site, please bring this form with you. If paying with a Purchase Order, bring a copy of the PO with you.**

For Office Use Only

Amount Rec. $_____ Payment Type: Per. Ck. #_____ CC. Ref. #_____

Date Rec. ____/_____/2008 Dist. Ck. #_____ PO #_____

District _____