



## 2010 CAMA Conference Registration Form

Please make checks payable to CAAO, and mail to:

**CAAO, PO Box 1566, Columbus, OH 43216-1566**

Payment may also be made by credit card at [www.accreditationohio.org](http://www.accreditationohio.org)

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Title \_\_\_\_\_ Agency \_\_\_\_\_

Address \_\_\_\_\_

Phone number \_\_\_\_\_ Email \_\_\_\_\_

Registration Fees	Before 04/18/10	After 04/18/10
____ 3 Day full registration	\$125.00	\$150.00
____ Sunday Only	\$ 75.00	\$100.00
____ Monday Only	\$ 75.00	\$100.00
____ Family member	\$100.00	\$125.00
____ Student (full-time)	\$ 50.00	\$ 75.00 (please include verification of student status)

Note: Family member registration is for a family member who is not employed in corrections and is accompanying an attendee. Access is provided to all meals and social events. Student rate is available to full-time undergraduate and graduate students who are not employed in corrections.

### Optional additional activities – Saturday, May 1

- \_\_\_\_ Golf Outing (9:00 a.m. – 4:00 p.m.) \$50.00  
\_\_\_\_ Fire Inspection Training (9:00 a.m. – 5:00 p.m.) \$30.00 (\$60.00 for non-conference attendees)  
\_\_\_\_ ACA Certification Exam (must be registered through ACA). No additional fee, time TBD

Note: Golf outing is open to conference registrees, family members of registrees, and vendors.

**Total amount enclosed \$** \_\_\_\_\_ (Please indicate if payment made on-line \_\_\_\_\_)

Please indicate any special dietary requirements \_\_\_\_\_

If you require airport transportation (no additional fee), please indicate your arrival information:

Date of arrival \_\_\_\_\_ Time of arrival \_\_\_\_\_

Airline \_\_\_\_\_ Flight number \_\_\_\_\_