



Registration Form

2011 Fall Conference: Catherine Watson Genna & Liz Brooks

Don't forget – you can register on-line at:
<http://cibtffallconference2011.eventbrite.com>

Attendee Information

Name: _____ Date: _____

Agency: _____ Job Title: _____

Address: _____

E-Mail Address: _____ Telephone Number: _____

Please note – e-mail address is required as registration confirmation & conference communication will be done only by e-mail.

Session Information

Daytime Session Only

- Early Bird (Before 9/14/2011) - \$90 (\$95 online or via paypal)
- Regular Registration (9/15/2011-10/11/2011) - \$105 (\$110 online or via paypal)
- Late Registration (After 10/11/2011) - \$115 (\$120 online or via paypal)

Daytime Session PLUS Evening Session with Catherine Watson Genna

- Early Bird (Before 9/14/2011) - \$110 (\$115 online or via paypal)
- Regular Registration (9/15/2011-10/11/2011) - \$130 (\$135 online or via paypal)
- Late Registration (After 10/11/2011) - \$145 (\$150 online or via paypal)

Daytime Session PLUS Evening Session with Liz Brooks

- Early Bird (Before 9/14/2011) - \$110 (\$115 online or via paypal)
- Regular Registration (9/15/2011-10/11/2011) - \$130 (\$135 online or via paypal)
- Late Registration (After 10/11/2011) - \$145 (\$150 online or via paypal)

Evening Session Only – Catherine Watson Genna

- Early Bird (Before 9/14/2011) - \$30 (\$32 online or via paypal)
- Regular Registration (9/15/2011-10/11/2011) - \$35 (\$37 online or via paypal)
- Late Registration (After 10/11/2011) - \$40 (\$42 online or via paypal)

Evening Session Only – Liz Brooks

- Early Bird (Before 9/14/2011) - \$30 (\$32 online or via paypal)
- Regular Registration (9/15/2011-10/11/2011) - \$35 (\$37 online or via paypal)
- Late Registration (After 10/11/2011) - \$40 (\$42 online or via paypal)

I am a local MD/RN from _____ practice.

Please select the appropriate option from above, and adjust payment as follows. The evening session with Catherine Watson Genna will be no charge. If attending both the daytime & CWG evening session, please see the daytime session only rates.

Note: For late registration, please call Mary @ 614-264-6283 to ensure space is available before sending payment

Payment Information

Payment can be made via check or paypal. Make checks payable to: *Central Illinois Breastfeeding Task Force*, Paypal payments can be sent to paypal@centralillinoisbreastfeeding.org

We request that payment accompany registration. For those registering from health departments or other organizations where this is not possible, please note that below and submit payment separately if necessary.

- Payment included Payment sent via paypal.
 Payment to follow (please explain & indicate PO# below if applicable) _____
 PO issued – PO# _____

Registration Information

We encourage registration to be submitted via e-mail or mail.

Submit via e-mail to fallconference@CentralIllinoisBreastfeeding.org, or mail to:
Central Illinois Breastfeeding Task Force, c/o Mary Slone, Treasurer
6812 N. Wilshire Dr.
Peoria, IL 61614

You may also register via fax to 309-925-3202

For questions please e-mail fallconference@CentralIllinoisBreastfeeding.org, or call 614-264-6283 (Mary).

Office Use Only

Date Received: ___/___/___ Payment: Received - Amount: _____

www.CentralIllinoisBreastfeeding.org/FallConference