

ANNUAL CONVENTION REGISTRATION FORM

COLORADO WATER CONGRESS 52nd ANNUAL CONVENTION Hyatt Regency Denver Tech Center January 27 - 29, 2010

RESPECTING OUR PAST, LEADING IN THE PRESENT, BUILDING FOR THE FUTURE

NAME: _____
 ORGANIZATION: _____
 PHONE: _____
 EMAIL: _____

Please submit
a separate
registration
form for each
person

	<u>Member Amount*</u>	<u>Non-member Amount</u>
(Check <input type="checkbox"/> all that apply)		
<u>2010 Annual Convention Registration</u>		
Prepaid by Friday, January 22, 2010	___ \$250	___ \$500
After Friday, January 22, 2010	___ \$300	___ \$600
<u>Meals</u>		
Thursday Legislative Breakfast (January 28)	___ \$25	___ \$25
Thursday Luncheon (January 28)	___ \$35	___ \$35
Friday Business Breakfast (January 29)	___ \$25	___ \$25
Friday Aspinall Award Luncheon (January 29)	___ \$35	___ \$35
<u>Preconference Workshops on Wednesday, January 27</u>		
Colorado River Compacts Workshop: 8:30 am – Noon	___ \$50	___ \$100
Directors & Officers Training for Ditch Companies 1:00 pm – 5:00 pm	___ \$50	___ \$100
Communications Skills Workshop: 2:30 pm – 5:00 pm	___ \$50	___ \$100
Water Quality Workshop (includes lunch) 8:30 am – 5:00 pm	___ \$125	___ \$125

**Applicable to both CWC/DARCA members. Are you a DARCA MEMBER? If so, please check here: ___*

TOTAL REGISTRATION, MEALS & WORKSHOP(S)

Please make checks payable to: Colorado Water Congress

Registration Form may be **FAXED** to: **(303) 837-1607**
 or **MAILED** to: **Colorado Water Congress, 1580 Logan Street, #700, Denver, CO 80203**

Registration and meal refunds will be made less a \$50 handling fee only if the CWC staff is notified in writing no later than Friday, January 22, 2010. There are no refunds available after this time and date.

Questions? Contact us at (303) 837-0812 or via e-mail to: cwc@cowatercongress.org



COLORADO WATER CONGRESS

Credit Card Charge Form

Fax Instructions:

Please enter the following information and then fax this sheet to the Colorado Water Congress at **303-837-1607**

Credit card: _____ (Visa, MasterCard, Discover, American Express)

Card #: _____

Expiration date: _____ (month and year)

Verification code: _____ (last three printed digits on back of card in signature block area)

Total amount of charge: \$ _____

Name on card: _____

Billing address: _____

City/State/Zipcode: _____

Phone: _____

Email: _____

MEMBER payment is for _____

ORGANIZATION if different from above _____

THIS IS FOR – PLEASE IDENTIFY _____

Conventions (Annual or Summer)

Membership

Publications

Standing Committee (State and/or Federal)

Videos

Workshop Title

Other - explain

Please call us with any questions at 303-837-0812