



REGISTRATION FORM

CSG-WEST Annual Meeting

October 5 - 8, 2009 • Santa Fe, New Mexico

"Serving Western Legislatures"

Reminder: With world-renowned Balloon Fiesta in Albuquerque the first weekend in October, you need to **make your Santa Fe hotel reservations early.** CSG-WEST special room rates will be **available until September 4th**, unless rooms sell out sooner. More information about the meeting and hotel rooms can be found at www.csgwest2009.org. You can also register online at www.csgwest.2009.org, instead of using this form.

Name _____
 Title _____
 Organization _____
 Address _____
 City _____ State _____ Zip _____
 Office Phone _____ Home or Cell _____ Fax _____
 E-mail _____

Registration Fees <i>(please check one)</i>	Postmarked or faxed by August 21	Postmarked or faxed after August 21
<i>Registration fees entitle access to all programs and social events</i>		
<input type="checkbox"/> Official Party <i>(Government officials and staff)</i>	\$300	\$350
<input type="checkbox"/> Public Sector <i>(non-profit organizations)</i>	\$300	\$350
<input type="checkbox"/> CSG Associate <i>(only 1 representative per company)</i>	\$300	\$350
<input type="checkbox"/> Private Sector	\$600	\$650
<input type="checkbox"/> Spouse/Guest	\$100	\$125
<i>(1 per registrant; may not be from your company)</i>		
<input type="checkbox"/> Adult Child	\$150	\$175
<input type="checkbox"/> Child(ren)	\$ 50	\$ 75
<input type="checkbox"/> One Day for government or public sector	\$150	\$175
<input type="checkbox"/> One Day for private sector	\$300	\$325
<input type="checkbox"/> Meeting Sponsor*		
<input type="checkbox"/> \$2,500 – 1 Complimentary Registration		
<input type="checkbox"/> \$5,000 – 2 Complimentary Registrations		
<input type="checkbox"/> \$10,000 – 3 Complimentary Registrations		
<input type="checkbox"/> \$25,000 – 6 Complimentary Registrations		
<input type="checkbox"/> \$40,000 – 12 Complimentary Registrations		

Fee Payment

Registrant \$ _____
 Spouse/Guest \$ _____
 Child(ren) \$ _____
 Total \$ _____

Method of Payment

Check is enclosed I will pay on-site
 State Billing *(please see below)*

Credit Card

Amex MC Visa

Card # _____
 Expiration Date _____

Authorized signature _____

*Sponsor Information: For more info, contact CSG-WEST staff Cheryl Lee Duvauchelle at (415) 330-0312 or email cduvauch@csg.org

Spouse/Guest/Child(ren)
Please provide names below:

Spouse: _____
 Guest: _____
 Child(ren): *(please provide name and age)*

For Western Legislators Only: State Billing Information
If you would like your state invoiced after the meeting; provide the following information:

State Contact: _____
 Billing Address: _____
 Billing Address: _____
 City, State, Zip: _____
 Phone Number: _____

Comments: Please list special dietary requirements, onsite assistance or needs required under the Americans with Disabilities Act.

Cancellation Policy

All cancellations must be in writing and received no later than September 25th for a refund. Submit your cancellation to the CSG-WEST office in writing by postal service or email using the contact information listed below. Cancellations received before September 25th will receive a refund less a \$50 processing fee. Cancellations received after September 25th and no shows will not receive a refund and any balance due will be owed by the registrant.

Fax this form to (916) 446-5760 or mail to:
CSG-WEST, 1107 Ninth Street, Suite 730, Sacramento, CA 95814

Questions?
Call (916) 553-4423 or email csgw@csg.org