

REGISTRATION FORM
112th Ohio Welfare Conference
October 30, 31, November 1, 2002
Columbus, Ohio

NAME:

Email _____

AGENCY: _____ Last _____ First _____ TYPE: __ JFS__ ODJFS __ CSB __ CSEA__ Mental Health __other _____

MAILING ADDRESS: _____

STREET

CITY

STATE

ZIP

COUNTY: _____ PHONE NUMBER: _____

Please circle the appropriate category:

All Days

One Day Only

Pre-Registration Postmarked by **10/11/02**
 (payment & form must be included)

\$119

\$85

Registration After **10/11/02**

\$144

\$95

Full Time Student Fee

\$45

\$35

Name of School: _____

Please attach copy of current student ID

Retired Person Fee

\$40

\$30

TOTAL Amount of Enclosed Check or Money Order \$ _____ **(Do Not Send Cash)**

WALK IN REGISTRATIONS ARE WELCOME.

CEU & BRCH CREDITS BEING OFFERED AT NO CHARGE

Complementary full course luncheon offered to those registered for both days of the conference and who make a commitment to attend! People who wish to attend only on Thursday will be considered on a space available basis.

I will attend the luncheon. Select one: Chicken Vegetarian

I will not attend the luncheon.

To aid in Conference Planning please indicate the numbers of the workshops you will attend. You will not be confined to these workshops since all sessions will be open (first come, first seated).

Wednesday	1:00 p.m. - 2:15 p.m.	Plenary session / Keynote
Wednesday	2:30 p.m. - 4:00 p.m.	Workshop Number: _____
Thursday	8:30 a.m. - 10:00 a.m.	Workshop Number: _____
Thursday	10:15 a.m. - 11:45 a.m.	Workshop Number: _____
Luncheon	12:15 p.m. - 2:15 p.m.	
Thursday	2:45 p.m. - 4:15 p.m.	Workshop Number: _____
Friday	8:30 a.m. - 10:00 a.m.	Workshop Number: _____
Friday	10:15 a.m. - 11:45 a.m.	Workshop Number: _____

CANCELLATIONS: To receive a refund of registration fees a written notice must be received no later than the closed of business day October 18, 2002. A \$25.00 processing fee will be charged. **Cancellations received after October 18, 2002 will not be refunded and/or will be billed for amounts due.**

BILLINGS: Only agencies or organizations may be billed for fees. Enclose a statement on agency letterhead with billing information when you send the individual registration forms. Check, money order or PO numbers must accompany all agency registrations.

MAKE CHECK OR MONEY ORDER PAYABLE TO: OHIO WELFARE CONFERENCE

MAIL TO: Debbie Stokes, Treasurer
 Ohio Welfare Conference
 5 East Long Street Suite 1001
 Columbus, Ohio 43215 - 2915

HOTEL RESERVATIONS: You are responsible for making your own reservations and payment arrangements. PO numbers will be needed for agency direct billing.