Registration Form Colombia Support Network National Conference June 3 – 4 , 2016 Madison, WI

Please send the following information to the Colombia Support Network in Madison, WI as soon as possible: CSN PO Box 1505 Madison, WI 53701

Name Member /Non Member _____ Address_____

Phone_____E-mail_____

Please check all that apply

I will attend sessions Friday____Saturday__ Please reserve a room for me at a local hotel

Cost of food and other needs per person, \$100 Amount of check enclosed

Please make checks payable to: WICOLA/Colombia Support Network with "National Conference" in memo.

NOTE : No Parking fee at Edgewood College. Please register your car when arriving

I would like to stay at the house of a local volunteer I would like to make my own lodging arrangements Please list any food restrictions you may have (vegetarian, vegan, allergies)__

I will be arriving in Madison via: plane____bus____car____ I plan on renting a car while in Madison I will need transportation while in Madison I will need child care for _____child(ren). Age(s)_____

Please notify the CSN national office of your exact travel itinerary as soon as you know it. Keep in mind that cheaper flights may be available through Milwaukee or Chicago.

Below or on an additional sheet, please add any comments, questions, or additional information regarding your attendance to the national meeting as well as any topics of discussion you would like raised.