

Registration Form
Colombia Support Network National Conference
June 2-3, 2017
Predolin Hall, Room 306
Edgewood College
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 of CSN /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 Conference, including all meals, \$100 per person. One day cost, with meals, \$50.00 per person. Amount of check enclosed: _____.

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

NOTE: There will be no parking fee for us at Edgewood College, but please register your car at the front desk in Predolin Hall when you arrive, if possible.

I would like to stay at the house of a local volunteer _____
I would like to stay in an Edgewood College dormitory room _____
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 at the national meeting as well as any topics of discussion you would like raised.