



CA-NV-AWWA 2004 Annual Fall Conference Registration Form

Hyatt Regency at Capitol Park - Sacramento, CA • October 12 - 15, 2004

For Hotel Reservations Please Call (800) 233-1234



Occupation Codes (please check one): WTR Water Utility CTR Contractor CNS Consultant MFG Manufacturer REF Manufacturer's Representative DIS Distributor EDU Educator RES Research Laboratory FED Federal Government STA State Government LOC Local Government STU Student OTH Other _____

NAME (how you would like it to appear on your badge) _____

Title _____ Company _____

Address _____ City _____ State _____ Zip _____

Phone _____ Fax _____

Email _____ AWWA Member # _____

Type Of Membership (check one) Individual Organization Operator Utility

Complimentary Spouse/Guest (if attending) _____

(Household members ONLY. Not to be used for water industry personnel)

	On or Before Aug. 25th		On or Before Sept. 20th		After Sept. 20th (Onsite)		Please fill in column completely	
FULL REGISTRATION	w/Annual Dinner	w/o Annual Dinner	w/Annual Dinner	w/o Annual Dinner	w/Annual Dinner	w/o Annual Dinner		
AWWA MEMBER <i>Includes Keynote & Exhibitor Hosted Lunch.</i>	\$375	\$300	\$400	\$325	\$500	\$425	\$	
NON-MEMBER	\$425	\$350	\$450	\$375	\$550	\$475	\$	
Student or Retiree Registration	\$75	FREE	\$75	FREE	\$75	FREE	\$	
SPECIAL REGISTRATIONS <i>The following Special Registration includes Program Sessions and Exhibits.</i>								
Tues. One-Day, Oct. 12 (Member)*	---	\$150	---	\$190	---	\$200	\$	
Tues. One-Day, Oct. 12 (Non-Member)*	---	\$165	---	\$205	---	\$215	\$	
Wed. One-Day, Oct. 13 (Member)**	\$225	\$150	\$265	\$190	\$275	\$200	\$	
Wed. One-Day, Oct. 13 (Non-Member)**	\$240	\$165	\$280	\$205	\$290	\$215	\$	
Thurs. One-Day, Oct. 14 (Member)	---	\$75	---	\$100	---	\$125	\$	
Thurs. One-Day, Oct. 14 (Non-Member)	---	\$90	---	\$115	---	\$140	\$	
Exhibits Only: Tues., Oct. 12 (Member)	---	\$30	---	\$45	---	\$55	\$	
Exhibits Only: Tues., Oct. 12 (Non-Member)	---	\$40	---	\$55	---	\$65	\$	
Exhibits Only: Wed., Oct. 13 (Member)	---	\$30	---	\$45	---	\$55	\$	
Exhibits Only: Wed., Oct. 13 (Non-Member)	---	\$40	---	\$55	---	\$65	\$	
MEALS <i>If not part of above package</i>								
Annual Conference Dinner (Wed., Oct. 13th)	---	\$75	---	\$75	---	\$75	\$	
Keynote Luncheon (Tues., Oct. 12th)	---	\$35	---	\$35	---	\$35	\$	
Exhibitor Hosted Lunch (Wed., Oct. 13th)	---	\$20	---	\$20	---	\$20	\$	
SPECIAL EVENTS								
Golf Tournament, Oct. 12 <i>(Please include completed registration form on page 3)</i>	---	\$100	---	\$100	---	\$100	\$	
Wed. Technical Tour, Oct. 13 (Filtration Plant)	---	\$25	---	\$25	---	\$25	\$	
Thurs. Technical Tour, Oct. 14 (Treatment Plant)	---	\$25	---	\$25	---	\$25	\$	
WORKSHOP SELECTIONS								
Small Systems	---	\$20	---	\$20	---	\$20	\$	
CA-NV-AWWA Water College Education Fund Donation								
<input type="radio"/> Patron (\$500 or more) <input type="radio"/> Sponsor (\$25 - \$499) <input type="radio"/> Donor (\$5 - \$24) <input type="radio"/> Other							\$	
Help us to continue and expand Educational Programs with your tax-deductible donations.							\$	
Water For People Donations								
							\$	
* Please Note: Tues., Oct. 12 One Day Registration Includes Keynote Luncheon							Total Due	\$
** Please Note: Weds., Oct. 13 One Day Registration Includes Exhibitor Hosted Lunch								

- I AM A CWEA member (same rate as CA-NV-AWWA member)
- I AM A SPEAKER AT THIS CONFERENCE
- THIS IS MY FIRST CA-NV-AWWA CONFERENCE
- I AM A NEW MEMBER

Registrations must be accompanied by payment (Check, Money Order, Credit Card or physical Purchase Order) and received at the Section office by Sept. 20, 2004. Onsite registration will be required after Sept. 20. Refund requests must be submitted in writing to the Section office by Sept. 20. A \$25 administrative fee will be deducted from all refunds.

CA-NV-AWWA Contact Information: 10574 Acacia Street, Suite D6, Rancho Cucamonga, CA 91730 • Phone: (909) 481-7200 • Fax: (909) 481-4688

Payment Method

Purchase Order#: _____
(Must be accompanied by actual company purchase order)

(Make check payable, in U.S. funds, to CA-NV-AWWA)

Personal Check Co. Check Amt. \$ _____

Credit Card: Visa MC AMEX

Signature: _____ Exp. Date: _____

Card No.: _____ V-Code: _____
(Last 3 digits on back of card)

Name on Card: _____

Billing Address: _____
(Must be address in which your credit card statement is mailed)