

**REGISTRATION FORM
12TH ANNUAL**



Credit Union _____ Primary Contact _____ Title _____ Phone _____ E-Mail Address _____

PLEASE LIST THE NAMES AND TITLES OF ALL ATTENDEES FROM YOUR CREDIT UNION AND CIRCLE THE ATTENDANCE LEVEL OPTION FOR EACH:

Attendee	Title	E-Mail Address	One-Day Package - \$249 (Spouse/Guest \$199) Full-Conference Package - \$579 (Spouse/Guest \$219) Extended Conference Package - \$609 (Spouse/Guest \$229)	PRICE
				\$ _____
				\$ _____
				\$ _____
				\$ _____
				\$ _____

TOTAL _____

FOR POCUA MEMBERS ONLY - SUBTRACT 5% FROM THE TOTAL ABOVE - _____

FINAL TOTAL \$ _____

PLEASE FAX OR MAIL THE COMPLETED REGISTRATION WITH A CREDIT CARD FORM OR CHECK FOR THE TOTAL AMOUNT MADE PAYABLE TO:

**Bator Training & Consulting, Inc.
333 City Boulevard West, Suite 1700
Orange, CA 92868
FAX: 714-464-4262**

REFUND REQUESTS MUST BE RECEIVED BY 4/1/2015.