

72nd CEA International Conference and Training Event

Holiday Inn – River Walk
217 North Saint Mary's St
San Antonio TX 78205

Phone: 210.224.2500 Fax: 210.223.1302

Pre-Conference Event: July 30th, 1:00PM to 4:00PM

NCCER's Construction Career Pathways Initiative \$75.00

Conference registration DOES NOT include this Pre-Conference Event.

(A dessert bar will be provided)

Full Registration

(Includes President's Reception Sunday, Luncheon & Dinner Monday, Breakfast & Luncheon Tuesday, Brunch Wednesday)

By June 1, 2017:

- ___ \$369 for CEA Member (# _____)
- ___ \$449 for Non-Member
(Renew/join to receive member benefits)
- ___ \$299 for CEA Retiree or CEA Student

After June 1, 2017:

- ___ \$419 for CEA Member (# _____)
- ___ \$489 for Non-Member
(Renew/join to receive member benefits)
- ___ \$389 for CEA Retiree or CEA Student

Meal Preference:

- Regular Vegetarian

Events I Plan To Attend:

- Sunday Reception Monday Luncheon Monday TOY Gala Tuesday Breakfast
 Tuesday Luncheon Wednesday Brunch

One Day Registration

Monday: (Includes Luncheon & TOY Dinner Gala)

- ___ \$149 for CEA Member (# _____)
- ___ \$214 for Non-Member

Tuesday: (Includes Breakfast & Luncheon)

- ___ \$149 for CEA Member (# _____)
- ___ \$214 for Non-Member

Events for Non-Registered Guests:

- Sunday Reception \$35 Monday Luncheon \$36 Monday TOY Gala \$65
 Tuesday Breakfast \$29 Tuesday Luncheon \$48 Wednesday Brunch \$35

State Directors' Meeting:

(Only for persons attending State Directors' Meeting on Monday, July 31, 2017)

Total Payment:

\$ _____ (Total from Registration / Events)

Method of Payment:

- Check Credit Card Purchase Order

Hotel Reservation: To make a reservation please call the hotel below directly. (These rates are valid until June 25, 2017)

Holiday Inn – Riverwalk ~ 217 North Saint Marys St, San Antonio, TX 78205 ~ 210-224-2500 ~ \$149/Night ~ Group Code: BQW

Mail, fax, or email this completed form with payment to:
CEA Texas, Attn: Kevin Ainsworth, PO Box 206, Mart, TX 76664
Fax: 443-459-3088
Email: registration@ceanational.org



First Name: _____
Last Name: _____
Company: _____
Position/Title: _____
Address: _____
City/State/Zip: _____
Phone Number: _____
Email: _____

Credit Card / PO Payment:

Name of Cardholder: _____
Cardholder Billing Addr: _____
Card Type: __VISA __Amex __Disc __MC
Card Number: _____
Expiration Date: ____/____
Authorized Signature: _____
Email Address: _____
PO # _____
Inv# (CEA Office Use Only): _____