



**for this conference! Online Registration Available at [ceanational.org](http://ceanational.org)**

**LOCATION:** Kalahari Resorts and Conventions | 7000 Kalahari Drive, Sandusky, OH 44870 | (877) 525-2427

**LODGING:** A limited number of rooms have been reserved at the Kalahari Resorts and Convention Center for 2019 Leadership Forum and Region 3 & 4 Conference and Training Event attendees at special group rates. Call the hotel at (877) 525-2427 by 5 PM March 3, 2019 and mention you're with the CEA Leadership Forum along with Region 3 & 4 Conference and Training Event to receive the conference rates.\*

**FORUM LODGING: Attendees:** \$129/night single, double, quad

*Note: All guest rooms are subject to a 13.75 % room tax unless proper tax exemption documentation is supplied and approved prior to arrival.*

**REGISTRANT INFORMATION:**

Name \_\_\_\_\_ CEA Member Number (if applicable) \_\_\_\_\_  
 Title \_\_\_\_\_ Agency \_\_\_\_\_  
 Mailing Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_  
 Phone Number \_\_\_\_\_ Email \_\_\_\_\_

**REGISTRATION FEE INFORMATION:** Forum registration rates include Sunday reception, Monday breakfast, Monday luncheon, Tuesday breakfast, and Tuesday luncheon. Additional meal tickets may be purchased for an additional cost. Must be postmarked by dates below to receive rate.

Forum Registration	By March 3	After March 3
Member	<input type="checkbox"/> \$249	<input type="checkbox"/> \$299
Non Member	<input type="checkbox"/> \$320	<input type="checkbox"/> \$365
Retiree	<input type="checkbox"/> \$225	<input type="checkbox"/> \$245
Additional Conference Options		
Pre Conference Sunday		<input type="checkbox"/> \$65
State Directors Meeting		<input type="checkbox"/> \$50

**Forum Registration:** (See fee grid at left) \$ \_\_\_\_\_  
**State Directors Meeting:** (If attending) \$ \_\_\_\_\_  
**Pre Conference:** (If attending) \$ \_\_\_\_\_  
**Additional event/meal tickets:**  
 Sunday reception @ \$40 each \$ \_\_\_\_\_  
 Monday breakfast @ \$25 each \$ \_\_\_\_\_  
 Monday luncheon @ \$30 each \$ \_\_\_\_\_  
 Tuesday breakfast @ \$25 each \$ \_\_\_\_\_  
 Tuesday luncheon @ \$30 each \$ \_\_\_\_\_

**Meal preference:**  Regular  Vegetarian

**Total amount enclosed:** \$ \_\_\_\_\_

**PAYMENT INFORMATION:**

Return this completed form along with payment to:

**Jeanette Woodruff, OCSS, P.O. Box 779, London, OH 43140**

**OR** Send completed form as an email attachment to: [jeanette.woodruff@odrc.state.oh.us](mailto:jeanette.woodruff@odrc.state.oh.us)

**Check one:**  Check enclosed (payable to CEA)  Purchase Order # \_\_\_\_\_  VISA  MasterCard  Discover  American Express  
 Credit Card No. \_\_\_\_\_ Verification # \_\_\_\_\_ Exp. Date \_\_\_\_\_ Contact Phone No. \_\_\_\_\_  
 Cardholder Name \_\_\_\_\_ Authorized Signature \_\_\_\_\_  
 Cardholder Billing Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_