Conference Registration Form

8th Eastern Native Grass Symposium
October 1-4, 2012 • Doubletree Hotel • Charlottesville, Virginia

Please print or type—complete a separate form for each participant

Name
Title
Organization
*Org.’s FID#
Address
City State Zip
Daytime Phone No. Fax No.
Email

Registration fee:
☐ $200 Standard Participant Registration ($275 after August 31, 2012)
☐ $120 Student Registration ($165 after August 31, 2012)
☐ $160 Tuesday & Wednesday Only ($200 after August 31, 2012)
☐ $125 Wednesday Only ($165 after August 31, 2012)
☐ $50 Thursday Only ($75 after August 31, 2012)

Do you require a vegetarian meal option? ☐ Yes ☐ No

If attending an onsite workshop on Tuesday, which of the following will you attend?
☐ Native Grass Identification
☐ Seed Drill Calibration
☐ Small Scale Seed Cleaning
☐ I am not attending an onsite workshop

If attending a field trip on Wednesday, which of the following will you attend?
☐ Charlottesville & Monticello
☐ Fort Pickett in Blackstone, Virginia
☐ Shenandoah National Park & Big Meadows
☐ I am not attending a field trip

Refund and Cancellation Policy
Requests for refunds will be honored when received seven calendar days prior to the program. However, another person may be substituted at any time for this program. A $25 administrative fee will be deducted for cancellations. In the unlikely event that this program is cancelled or postponed due to insufficient enrolments or unforeseen circumstances, the university will fully refund registration fees but cannot be held responsible for any other expenses, including cancellation or change charges assessed by airlines, hotels, travel agencies, or other organizations.

For weather or disaster-related program cancellation or postponement information, please call 540-231-9489.

Method of payment: Payment of registration fees is required prior to program attendance. Registration will be processed when payment is received.

☐ Check enclosed (Make payable to: Treasurer, Virginia Tech CE)
☐ Credit Card: ☐ Visa ☐ MC ☐ AmEx

Checks must be drawn on U.S. bank in U.S. dollars.

(Credit Card payment may be mailed, faxed, or given to registrar over the phone. No credit card information will be processed by voice mail or email.)

Cardholder name
Cardholder signature Date

Return with payment by September 24, 2012 (no staples, tape, or paper clips, please) to:
Conference Registrar
Continuing and Professional Education
Virginia Tech, Mail Code 0272
702 University City Blvd.
Blacksburg, VA 24061
phone: 540/231–5182
fax: 540/231–3306 (for credit card registrations only)

*Necessary to process a refund payable to any company, agency or government.
The information you provide is subject to the Freedom of Information Act guidelines.

Office Use
Entered AMT: __________
CC/CHK#: __________
DATE: __________