



Registration Form



Fill in the blanks, check off the boxes, and mail or fax your registration form today.

A. ATTENDEE INFORMATION

This is my first CRA Conference.

Name _____

Company _____

Address _____

City _____

State _____ Zip _____

Phone _____

Fax _____

E-mail _____

Web site _____

B. CONFERENCE FEES (Check one):

- \$255 for CRA member before 02/15/08
- \$315 for CRA member after 02/15/08
- \$315 for non-member before 02/15/08
- \$375 for non-member after 02/15/08
- \$150 for one-day pass - 03/26/08
- \$150 for one-day pass - 03/27/08
- \$100 for one-day pass - 03/28/08

SPEAKERS ONLY

Free on the day you speak (circle one)

Tues. Wed. Thur. Fri.

- \$160 full conference speaker registration

C. JOIN THE CRA! (membership details p. 6)

D. FAST PITCH (\$10 per ticket)

E. TUESDAY WORKSHOPS

- PLANT - Train the Trainer - \$25.00 *(incl. lunch)*
- Sustainability in Schools - \$15.00
- Recycling Business Financing - \$15.00
- Reaching for the STAR - \$15.00
- Household Hazardous Waste - \$15.00
- KAB Affiliate Workshop - \$15.00

F. TOURS - \$15.00

Tuesday Tours

- Inter-Faith Food Shuttle/Piedmont Biofuels *(includes lunch)*
- MRF Tours : WMRA, CRA and Sonoco

Wednesday Tours

- NC Food Bank/General Assembly Legislative Building *(includes lunch)*
- Habitat for Humanity ReStore

G. GOLF CLASSIC

(\$65 per player includes green fees, cart rentals, range balls and lunch)

- Yes! Sign me up for Tuesday, March 25.
Your handicap: _____
Pair With: _____

H. GUEST MEAL TICKETS (\$25 per guest ticket)

- Green Reception/Auction/Dance - March 26
- Awards Luncheon - March 27

I. OPTIONAL MEALS

- Vegetarian
- Vegan
- Other _____

J. CAROLINA HURRICANES GAME (\$22 per ticket)

Individuals may send a separate payment to the CRA for this event if your institution or state agency will not cover this cost.

K. PAYMENT INFORMATION

Conference Fee (Section B)	\$ _____
CRA Membership (Section C)	\$ _____
Fast Pitch (Section D)	\$ _____
Workshops (Section E)	\$ _____
Tours (Section F)	\$ _____
Golf Tournament (Section G)	\$ _____
Total Guest Meals (Section H)	\$ _____
Carolina Hurricanes Game (Section J)	\$ _____
Registration Total	\$ _____

Fill in the blanks, check off the boxes and mail or fax your registration form with payment to the CRA : PO Box 1578, Pittsboro, NC 27312 or (919) 545-9060.

- Visa
- MC
- AMEX

Card # _____

Exp. _____

Name on Card _____

Signature _____

Date _____

Refund Policy: All requests for refunds must be received in writing prior to March 3, at this time 50 percent of your registration fees will be returned to you. After March 3 no refunds or reapplication of fees will be allowed. Please allow 90 days after conference for processing of refunds.

The Carolina Recycling Association and its Councils do not discriminate on the basis of race, color, religious affiliation, sex, disability, or age in its membership, pro-