

CORN BELT SEED CONFERENCE

Pre-Registration Form – February 8-10, 2012

Please make the following registration selections at the special advance rate. Name badges and meal reservations will be available at the registration desk. Badges are required for all conference functions. **Return this form to the CBSC registration office before January 27, 2012. No refunds will be made after February 1, 2012.** Hotel reservations can be made with the Indianapolis Marriott North online by visiting www.cbsconference.org or calling (800)-228-9290, mention the Keystone location and the Corn Belt Seed Conference to receive the special rate. Make **hotel reservations before January 27, 2012** to receive the special conference room rate of \$109.

Option A - \$250: Corn Belt Seed Conference
Includes: Thursday Breakfast, Meetings, Lunch, Hors D'oeuvres Social and Friday Breakfast & Meeting

Option B - \$150: Communication Technology Workshop - Wednesday Only
Includes: Wednesday Workshop and Lunch & Social Hour

Option C - \$250: Communication Technology Workshop and Thursday Only Conference
Includes: Wednesday Workshop, Lunch and Social Hour, Thursday Breakfast, Meetings, Lunch & Hors D'oeuvres Social

Option D - \$ 180: Corn Belt Seed Conference - Thursday Only
Includes: Thursday Breakfast, Meetings, Lunch & Hors D'oeuvres Social

Option E - \$325: Entire Corn Belt Seed Conference with Communication Technology Workshop
Includes: Wednesday Workshop, Lunch & Social Hour, Thursday Breakfast, Meetings, Lunch, Hors D'oeuvres Social & Friday Breakfast & Meeting

Option F - \$40: Guest/Spouse Program
Includes: Thursday Evening Hors D'oeuvres Social

Please check option selection(s) for each attendee and list names as they are to appear on name badge.

	Package:	A	B	C	D	E	F	
Name: _____		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Amount: \$ _____
Name: _____		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Amount: \$ _____
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Name: _____		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Amount: \$ _____
								Total \$ _____

Company Name: _____

Contact: _____ **Phone:** _____

Address: _____

City: _____ **State:** _____ **Zip** _____

Email: _____

Return This Form To CBSC registration office via Mail or Fax By January 27, 2012

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