



# CAA 70<sup>th</sup> Annual Convention & Reimbursement Conference

## September 25-28, 2018

### REGISTRATION FORM

#### IMPORTANT, PLEASE READ!

Full registration features admission to all events on Wednesday, September 26th & Thursday, September 27th including seminars, all refreshments, CAA Marketplace, Opening Lunch, Chair's Reception and Thursday Lunch. *Full registration does not include the golf tournament, Wednesday reception or CADS Certification course.*

Company/Employer \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Full Registration Attendee Names: \_\_\_\_\_

Golf Tournament Attendee Names: \_\_\_\_\_

Opening Reception Attendee Names: \_\_\_\_\_

Lunch/Reception Guest Names: \_\_\_\_\_

NAAC CADS Course Names: \_\_\_\_\_

#### Registration Options:

	Qty		Member Price/ Non Member Price	Total
Early Full Registration (Before 9/7/18) .....	_____	@	\$425/\$550	\$ _____
Late Full Registration .....	_____	@	\$515/\$640	\$ _____
NAAC CADS Course .....	_____	@	\$155	\$ _____
Golf Tournament .....	_____	@	\$310/\$410	\$ _____
Wednesday Opening Reception .....	_____	@	\$40/\$50	\$ _____

#### Guest Tickets

Wednesday Opening Lunch.....	_____	@	\$55/\$65	\$ _____
Wednesday Chair's Reception.....	_____	@	\$65/\$75	\$ _____
Thursday Lunch .....	_____	@	\$55/\$65	\$ _____
Golf Tournament.....	_____	@	\$310/\$410	\$ _____
Wednesday Opening Reception .....	_____	@	\$40/\$50	\$ _____

**TOTAL REGISTRATION FEES = \$ \_\_\_\_\_**

#### METHOD OF PAYMENT

Check Payable to California Ambulance Association       MasterCard     Visa     American Express

Please fax credit card payments; do not email!

Card # \_\_\_\_\_ CID # \_\_\_\_\_

Billing Address: \_\_\_\_\_

Signature \_\_\_\_\_ Exp. Date \_\_\_\_\_

Send completed form to: CAA

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