



Best of Show!

84th Annual C.A.F.E. Convention

**November 17 - 20, 2010
Hyatt Regency Calgary**

Convention Delegate Registration Form

PLEASE PRINT (please complete a separate form for EACH delegate)

Name: _____ Position: _____

Organization: _____ Mailing Address: _____

City: _____ Province: _____ Postal Code: _____

Telephone: _____ Facsimile: _____ E-mail: _____

Name to appear on Delegate Budget (if different from above) _____

Please explain any food allergies or special dietary needs: _____

Do not include my name on the list of Delegates given to the Trade Show Exhibitors

PART A: CONFERENCE REGISTRATION

Full Delegate Registration: Includes: all available speaker sessions, meals, hospitality suite, and evening events.		Total (\$)
<input type="checkbox"/> Member: \$699 (paid before May 31, 2010) \$730 (June 1 - Oct. 4, 2010) \$775 (after Oct. 4, 2010)		
<input type="checkbox"/> Non-Member: \$850 (before Oct. 4, 2010) \$895 (after Oct 4, 2010)		
Daily Delegate Registration: Includes: all available speaker sessions, meals hospitality suite, and evening event for selected day.		
<input type="checkbox"/> Thursday, Nov. 18 • Member: \$275 • Non-Member: \$350		
<input type="checkbox"/> Friday, Nov. 19 • Member: \$275 • Non-Member: \$350		
<input type="checkbox"/> Saturday, Nov. 20 • Member: \$275 • Non-Member: \$350		
PART (A) TOTAL:		

PART B: ADDITIONAL EVENING EVENT TICKETS

Additional Event Tickets: Event tickets are included with your registration but additional tickets can be purchased for guests.		
	Qty.	Total (\$)
<input type="checkbox"/> Thursday, Nov. 19 C.A.F.E. Cabaret • Members \$90 • Non Members \$135		
<input type="checkbox"/> Friday, Nov. 20 Canadian Youth Talent Competition • Members \$25 • Non Members \$25		
<input type="checkbox"/> Saturday, Nov. 21 Host Social • Members \$105 • Non Members \$165		
PART (B) TOTAL:		

Registration (Part A) _____
 Additional Tickets (Part B) _____
 Sum of Registration and Additional Tickets _____
 Calculate Credit Card Fee (3.5%) if required _____
 Sum including Credit Card Fee if required _____
 Calculate 5% GST tax (118829365TR0001) _____
TOTAL PAYMENT _____

METHOD OF PAYMENT

Cheque/Money Order (payable to: C.A.F.E.)
 Visa MasterCard Expiry: _____

Card Number: _____

Name of Cardholder: _____

Authorization Signature: _____

Postal Code if different from above: _____ Date: _____

SEND COMPLETED FORM & PAYMENT TO:

43 Eccles Street
 Ottawa, Ontario, K1R 6S3
 Telephone: (613) 233-0012
 Facsimile: (613) 233-1154
 E-mail: info@canadian-fairs.ca
 Website: www.canadian-fairs.ca

PAYMENT INSTRUCTIONS

- Payment must accompany the registration form.
- A fee of \$75 will be charged for cheques returned non sufficient funds (NSF).
- Official receipts will be provided upon full payment.

CANCELLATION & REFUNDS

- Refund (less 20%) if written cancellation is received before Sept. 15, 2010.
- Refund (less 50%) if written cancellation is received between Sept. 15 - Oct. 15, 2010.
- No refunds will be granted after Oct. 15, 2010.