



KAEOPP SPRING MEETING REGISTRATION

2009 KAEOPP Spring Meeting

Dale Hollow Lake State Park
April 7 & 8 2009

Full payment must accompany this form. Make checks payable to **KAEOPP**. If you would like to pay with a credit card or pro card please contact Amanda Keller for the required form.

Mail this form and payment to:

KAEOPP Treasurer
Amanda Keller
Morehead State University
205 Waterfield Hall.,
UPO 1378
Morehead, KY 40351

Thank you and we look forward to seeing you at the Spring Meeting!

(Please type or print clearly)

Last _____ First _____

Title & Project(s)

Institution/Agency

Address

City _____ State _____ Zip _____

Telephone (____) _____
Fax _____

E-mail Address
_____@_____

Will you be attending your first KAEOPP spring meeting?
_____ Yes _____ No

Are you a new member? _____ Yes _____ No

Registration Forms (**Must be received by March 24**)

**Accommodations: (Includes lodging and three meals)
(Dinner on the 7th, Breakfast and Lunch on the 8th)**

Individual room:	\$110.00
Double Occupancy:	\$ 80.00
Triple Occupancy:	\$ 70.00

A \$25 meal plan fee will apply to those members who will not need overnight accommodations, but will attend meetings/sessions.

Total Enclosed.....\$_____

Please print the name of the person (s) with whom you will be sharing a room.

