

La Leche League of Eastern Pennsylvania 2016 Area Conference Registration Form

PRIMARY REGISTRANT:

Name:		
Address:		
City:	State:	Zip:
Phone: ()		
Email:		
LLL Group you attend:		
Check all that apply		
<input type="checkbox"/> Leader ____ yrs	<input type="checkbox"/> IBCLC	
<input type="checkbox"/> Leader Applicant	<input type="checkbox"/> RN	
<input type="checkbox"/> LLL Member	<input type="checkbox"/> Conference Speaker	
<input type="checkbox"/> Alumna Leader	<input type="checkbox"/> Seat me at the Alumnae table	
<input type="checkbox"/> Area Council (specify) _____		
<input type="checkbox"/> Other (specify) _____		
<input type="checkbox"/> I am attending for CERPs (Please include \$12 fee per CERP session)		
<input type="checkbox"/> Yes! I am interested in volunteering (check all that apply)		
Where: <input type="checkbox"/> Children's Activities	<input type="checkbox"/> Registration	
<input type="checkbox"/> Silent Auction	<input type="checkbox"/> Area Sales	<input type="checkbox"/> Where Needed
When: <input type="checkbox"/> Registration	<input type="checkbox"/> Session #	<input type="checkbox"/> Close <input type="checkbox"/> As needed

PRIMARY REGISTRANT WORKSHOP SELECTIONS:

	SATURDAY				SUNDAY	
	Session 1	Session 2	Session 3	Session 4	Session 6	Session 7
Choice 1						
Choice 2						

SECONDARY REGISTRANT:

Name:
Check all that apply <input type="checkbox"/> Spouse/Partner or <input type="checkbox"/> Grandparent <input type="checkbox"/> Speaker

On the back of this form, please list all additional adults and children who will accompany you to the conference. All attendees must have nametags.

SECONDARY REGISTRANT WORKSHOP SELECTIONS:

	SATURDAY			
	Session 1	Session 2	Session 3	Session 4
Choice 1				
Choice 2				

Fill out only if attending sessions.

Register Online: www.LLLofeasternpa.org/conference2016

We would be happy to print a list of your session topic & room #s, so that a caregiver not attending sessions can locate you, should the need arise:

- Caregiver will attend sessions with mother & baby.
 Caregiver needs a list of session locations only.

Check here if you have a disability and may require accommodation to fully participate. Please indicate need:

Stroller permit for special situations such as multiples or mother / baby with disabilities.

REGISTRATION FEES:	\$ Each	Qty	\$ Subtotals
FRIDAY:			
Primary Registrant	Free		
Family Members Attending	Free		
Attending only Friday Meet & Greet	\$5.00		
SATURDAY:			
LLL Leader/Applicant/Alumna	\$80.00		
LLL Member	\$90.00		
Non-Member	\$100.00		
Spouse/Grandparent	Free		
Alumna Special (lunch / session 304 only)	\$32.00		
SUNDAY: Leader Enrichment Workshop			
LLL Leader/Applicant/Alumna	\$45.00		
OTHER FEES:			
Late Fee (October 11-15)	\$10.00		
On-Site Late Fee (after Oct 15)	\$15.00		
LLL EPA Basic Annual Membership	\$30.00		
LLL EPA Annual Membership	\$50.00		
CERP Fee (per session)	\$12.00		
MEALS:			
	\$ Each	Qty	\$ Subtotals
Saturday Luncheon Buffet (1 included with primary registration; put a 1 in Qty space if eating)			
Primary Registrant	Free		
Adult (additional, age 12 and up)	\$27.00		
Child (age 3-11 yr)	\$14.00		
Child (under age 3)	Free		
Kosher Meal, meat, Primary Registrant	Free		
Kosher Meal, meat (additional, all ages)	\$27.00		
Saturday Dinner Buffet (not included with registration)			
Adult (age 12 and up)	\$27.00		
Child (age 3-11yr)	\$14.00		
Child (under age 3)	Free		
Kosher Meal, meat (all ages)	\$27.00		
Sunday Plated Lunch (1 included with primary registration; put a 1 in Qty space if eating)			
Primary Registrant *	Free		
Adult (additional, age 12 and up) *	\$36.00		
Child (age 3-11 yr) *	\$18.00		
Child (under age 3) *	Free		
Kosher Meal, meat, Primary Registrant	Free		
Kosher Meal, meat (additional, all ages)	\$36.00		
*please mark choice / # <input type="checkbox"/> chicken <input type="checkbox"/> pork <input type="checkbox"/> vegetarian			
*mark dessert choice / # <input type="checkbox"/> fruit plate <input type="checkbox"/> chocolate cake			
CONTRIBUTIONS: **			
	\$ Each	Qty	\$ Subtotals
Donations			
Friendly Message (write on back)	\$5.00		
Children of LLL (list on back)	\$2.00		
** Note: Must be received by Oct. 10 to be included in the Program Booklet.			

Total charges:

Discount:

TOTAL DUE:

Check #: _____

Please calculate your fees carefully.
Make checks payable to "LLL of Eastern PA."

Registrations postmarked October 11-15 must include a \$10 late fee.
Registrations postmarked after October 15 must include a \$15 late fee.