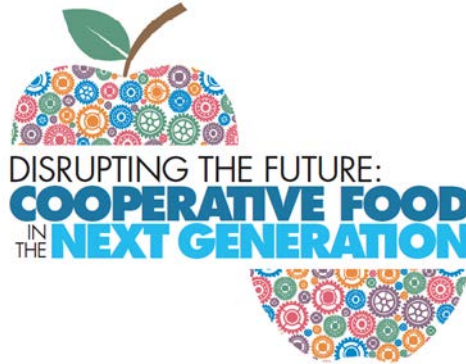


# 2016 CCMA CONFERENCE REGISTRATION

(One Full or Daily Paid Registration/Saturday Party Only – Mail/Fax/Email Registration Form)



Join NCBA CLUSA and pay member registration rate. Click [here](#) for details.

	Register by April 15	Register after April 15
<input type="checkbox"/> NCBA CLUSA Member	\$790	\$840
<input type="checkbox"/> Nonmember	\$870	\$920
<input type="checkbox"/> Friday Single	\$560	\$560
<input type="checkbox"/> Saturday Single	\$600	\$600
<input type="checkbox"/> Guest Saturday Night Party	\$60	\$60
<input type="checkbox"/> Registration Promo Code: _____		
<input type="checkbox"/> I want to make a donation to the Bowers Fund      Amount: _____		
<input type="checkbox"/> I want to enter the Howard Bowers Fund drawing for an Apple watch		
- 1 ticket for \$10      _____		
- 3 tickets for \$25      _____		
- 5 tickets for \$40      _____		

Name: \_\_\_\_\_

Job Title: \_\_\_\_\_

Employer: \_\_\_\_\_

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

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

Phone: \_\_\_\_\_

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

**Payment**     MasterCard    Visa    American Express    Discover    Check

Card Number: \_\_\_\_\_

Security Code: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Billing Name: \_\_\_\_\_

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

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

Emergency contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Check Your Dietary restrictions:  Vegetarian    Gluten Free    Vegan    Dairy Free

Is this your first time attending the Cooperative Professionals Conference?    Yes    No

How did you hear about this conference? Please check all that apply.

Cooperative Grocer Magazine Ad    Cooperative Grocer Network Website    Email    Co-worker

Colleague    NCBA Website    Other \_\_\_\_\_

**By E-Mail or Fax:** Email your completed form to [registration@umass.edu](mailto:registration@umass.edu) or fax to (413) 577-8130. For security purposes, only provide credit card information by fax (413) 577-8130 or over the phone (413) 577-8102, and not send it via email.

**By Mail:** Mail your completed form, and check if applicable, to: UMass Conference Services, 810 Campus Center, 1 Campus Center Way, University of Massachusetts, Amherst, MA 01003.

**Email Registration Confirmation:** Each attendee will receive a confirmation email once they complete their registration, as well as a receipt when payment is received.

**Late Fees:** All registrations and/or payments received after **May 25, 2016** will be assessed a \$40.00 late fee. Participants registering or paying on-site will also be charged this late registration fee.

**Cancellation Fees:** Conferees canceling their registration before the close of business on **June 1, 2016** will receive a full refund or their fees minus a \$60.00 cancellation-processing fee and any administrative fees. All cancellations must be in writing. Telephone cancellations will not be accepted unless they are immediately followed by a letter of cancellation by way of email or fax. Individual participant payments will be accepted by the UCS Registration Office through the conclusion of the conference. UCS will charge conferees a **\$35.00** returned check fee to cover the administrative cost.