

CONFERENCE REGISTRATION FORM

Kansas Green Energy Summit

APRIL 8 – 9, 2010

Location

Independence Community College

1057 West College Ave., Independence, KS 67301

Tel: (620) 332-5621; Fax: (620) 331-6821; Web: www.indycc.edu

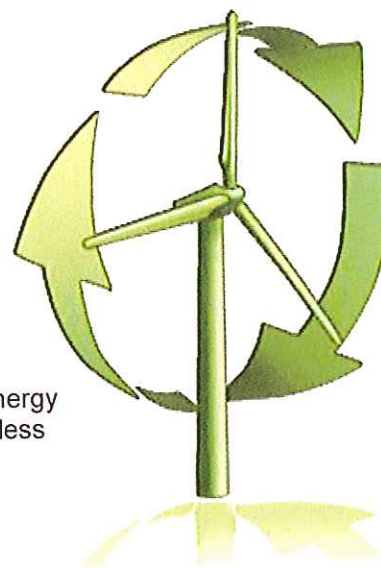
Hotel: Apple Tree Inn, 201 N. 8th St., Independence, Ks

Room Rate: Rates starting at \$82.85 per night (Please refer to the Kansas Green Energy Summit when making your hotel reservations.) Rate includes full breakfast, free wireless internet, and indoor-pool. There is also a business center available for use.

Hotel Reservations: 1-888-722-2525 or 620-331-5500

Hotel Reservation Deadline: March 28, 2010

Conference Reservation Deadline: April 1, 2010



Registration Fees (Check One Box)

- Kansas Council for Workforce Education (KCWE) Member - \$50
- Non-Member - \$ 99
- After March 25th, 2010 - \$150

Profile (Check One Box)

- Educational Staff/Faculty
- Business Owner/Professional
- Community Member

Last Name _____ First Name _____ Middle Initial _____

Name on Badge _____ Email Address _____

Title _____

Company _____

Mailing Address _____ City _____ State _____ Zip _____

Work Phone _____ Home Phone _____ Cell Phone _____

Emergency Contact

Full Name _____ Relationship _____ Phone _____

Special Needs

Dietary _____ Accessibility _____

Other Special Needs _____

Payment Options

- Check (personal or business)
- Cashier's Check

Note: Please attach all payments to registration form. List only one registrant per form. Registration fee must be paid by start of conference. Please check-in at the registration desk to receive name badge and conference materials. A written cancellation notice received no later than March 25th 2010 is required in order to issue a refund, less a \$25 cancellation fee. All refunds will be processed after the conference. Registration fees for "no shows" will not be refunded.

Mail this Form Along with Payment to:

Chenoa Bosch, Workforce Development Coordinator
Independence Community College
P.O. Box 708
Independence, KS 67301

For KGES Use Only		
Date Received _____	Invoice # _____	Processor Initials _____