

# REGISTRATION INFORMATION

## L.T.C. REGISTRATION FORM - MARCH 21, 2007

Name \_\_\_\_\_ Title \_\_\_\_\_

School \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Telephone \_\_\_\_\_

Circle One: LTC 501    LTC 508

- |    |                                    |                |
|----|------------------------------------|----------------|
| 1. | LTC Registration ONLY- CAAD Member | \$100.00 _____ |
| 2. | LTC Registration ONLY- Non-member  | \$125.00 _____ |
| 3. | Optional Dinner Following Course   | \$20.00 _____  |
| 4. | <b>TOTAL ENCLOSED FOR LTC</b>      | _____          |

Make checks payable to CAAD and mail to: Judy Sylvester, CAAD, 30 Realty Drive, Cheshire, CT 06410 **NO LATER THAN MARCH 1**

## CAAD CONFERENCE REGISTRATION FORM – MARCH 22 & 23, 2007

Name \_\_\_\_\_ Title \_\_\_\_\_

School \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Telephone \_\_\_\_\_

**Mock Turtle (Men's Sizes) –Circle One- S    M    L    XL    XXL**

Check One :

- |    |   |                |
|----|---|----------------|
| 1. | Conference Registration ONLY - CAAD Member            | \$ 75.00 _____ |
| 2. | Conference Registration ONLY - Non-member             | \$123.00 _____ |
| 3. | Email for Spouse Registration Info or Banquet Tickets | _____          |
| 4. | <b>TOTAL ENCLOSED FOR CONFERENCE REGISTRATION</b>     | _____          |

**(There are no one-day registration fees.)**

Make checks payable to CAAD. Mail to: Judy Sylvester, CAAD, 30 Realty Drive, Cheshire, CT 06410

NOTE: Only pre-registrations received by March 1, 2007 will be assured CAAD Conference gifts. No refunds after March 12, 2007.

## HOTEL REGISTRATION FORM

To register for the Rocky Hill Marriott call or mail directly:

Name \_\_\_\_\_ Mailing Address \_\_\_\_\_ Phone \_\_\_\_\_

Credit Card # - \_\_\_\_\_ VISA \_\_\_ MC \_\_\_ American Express \_\_\_ Expiration Date \_\_\_\_\_

Check one:  2 Double Beds     King Bed    Arrival Date: \_\_\_\_\_ Departure Date: \_\_\_\_\_

Send this form along with check or credit card # to:

Rocky Hill Marriott  
100 Capital Boulevard  
Rocky Hill, CT 06067  
ATTN: Laurie Quinn  
(860) 257-6000

OR Register Online:

<http://cwp.marriott.com/bdlrh/caad>

\$89.00 per night plus 12% tax  
Room rate NOT guaranteed after March 12, 2007.