



"Anchor Yourself In Education"



*Greater Oregon Society of
Government Meeting Professionals
2016 Annual Education Conference
Salishan Spa & Golf Resort
Gleneden Beach, OR 97388
January 31 - February 2, 2016*

Registration Form

Please complete the following and return by January 11, 2016

Name: _____ Title: _____

Organization/ Agency: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Email: _____

Preferred name for nametag: _____

Please note any special needs or dietary restrictions: _____

Conference Registration Fees: Conference registration fees include Sessions, Session Materials, Sunday Reception, Monday Breakfast, Lunch, and Dinner, Tuesday Breakfast and Lunch and all conference breaks.

Please select:

_____ SGMP Member _____ Non-SGMP Member

_____ This is my first time attending a GOSGMP Conference

SGMP Member Planner	\$125.00	SGMP Member Supplier	\$325.00
Non-Member Planner	\$150.00	Non-Member Supplier	\$400.00

NOTE: Supplier Sponsors will receive \$50 off registration.

Additional Guest Meal Costs: Please note: Registration fee includes all meals. Complete this section to select additional meals for any guest(s) accompanying you.

		Number	Enclosed
Reception, Sunday, January 31, 2016	\$25.00	_____	_____
Breakfast, Monday, February 1, 2016	\$20.00	_____	_____
Lunch, Monday, February 1, 2016	\$25.00	_____	_____
Banquet Dinner, Monday, February 1, 2016	\$45.00	_____	_____
Breakfast, Tuesday, February 2, 2016	\$20.00	_____	_____
Lunch, Tuesday, February 2, 2016	\$25.00	_____	_____
Total payment enclosed for additional guest meals:			\$_____

****Prepayment is required for additional guest**

Non-Attendee Suppliers (Reception included) \$200.00

Amount Due:

Registration fee: \$_____

Guest Meal Only \$_____

TOTAL AMOUNT DUE: \$_____

Payment Method: (please check your method of payment)

Check # _____ (included)

Please make checks payable to GOSGMP (tax ID #93-1015302)

Credit Card # _____ Expiration date: _____

Circle One: Visa MasterCard AMEX

Amount authorized: _____

Name on credit card: _____ Signature: _____

Card billing address: _____

City / State / Zip: _____

Purchase order # _____ (please attach to the registration form)

Please mail completed registration form along with payment to:

GOSGMP
Traci Gilges
P. O. Box 862
Salem, OR 97308

Additional Information:

Lodging at Salishan Spa & Golf Resort call 541-764-2371 or 1-800-452-2300 and Reference GOSGMP 2016 Annual Education Conference. Lodging rates start at \$98.00.

For additional information or questions, please contact: Jan Johnston, CGMP at 971-673-0154