



Seventh Annual

Traditional Agriculture & Sustainable Living Conference

Conference Registration Information

Personal Information

Full Name: _____

Last

First

M.I.

Address: _____

Street Address

Apartment/Unit #

City

State

ZIP Code

Home Phone: () _____ Alternate Phone: () _____

Additional Family Member's Name(s): _____

Additional Family Member's email: _____ Additional Family Member's Phone: () _____

Organization Information

Org. Name: _____ Title: _____

Address: _____ State/Zip: _____

Org. Phone: () _____ Cell Phone: () _____

Registration Fees

Individual Rate: _____ Number Attending: _____ \$50.00 _____ Sub-total: _____

Family Rate: _____ Number Attending: _____ \$75.00 _____ Subtotal: _____

Senior Rate*: _____ Number Attending: _____ \$25.00 _____ Subtotal: _____

Native/Student Rate: _____ Number Attending: _____ Free _____ Subtotal: _____

Meal Tickets: _____ Lunch (\$10.00 per person each day) Day 1: _____ Day 2: _____

* A small number of scholarships are available to individuals in need, email fourbridges@live.com for details.

Total Fees: _____