Problem Gambling and Health Awareness Conference

FOUR DIRECTIONS

REGISTRATION FORM

Register online at **www.evergreencpg.org** | **DEADLINE IS SEPTEMBER 15, 2022**

REGISTRANT INFORMATION

Name: _____ Credentials: _____

Position / Title: _____ Agency / Organization: _____

Address: _____

City: _____ State/Province: _____ Zip / Postal Code: _____

Day phone: _____ Cell/Alternate phone: _____

Email address: _____

REGISTRATION OPTIONS

All amounts shown in ***US Dollars***	*EARLY BIRD* **ECPG MEMBER** By –September 2–	*EARLY BIRD* **NON-MEMBER** By –September 2–	**ECPG MEMBER** After –September 2–	**NON-MEMBER** After –September 2–	**COLLEGE STUDENT**	**ON-SITE (FOR ALL)** After –September 15–
FOUR DIRECTIONS Four-Day Full Conference (includes Community Event) ☐ (September 19-22)	**$265**	**$295**	**$295**	**$335**	**$195**	**$375**
Recovery Coach Academy© Four-Day Training (includes Community Event) ☐ (September 19-22, **includes training manual**)	**$265**	**$295**	**$295**	**$335**	**$245**	**$375**
FOUR DIRECTIONS Two -Day Pre-conference Workshops ☐ (September 19-20)	**$135**	**$150**	**$150**	**$175**	**$95**	**$195**
FOUR DIRECTIONS Two-Day Main Conference (includes Community Event) ☐ (September 21-22)	**$175**	**$195**	**$195**	**$225**	**$125**	**$275**

Guest Meals (Breakfast and Lunch): _____ Adults @ $65/day = $_____ _____ Children (8-12 years of age*) @ $40/day = $_____

Community Dinner Event (included in registration fee for Full and Main Conference, RSVP required)**:** ☐ yes, I will attend ☐ no , I will not attend

Guests - Community Event (RSVP required): _____ Adults @ $49 = $_____ _____ Children (8-12 years of age*) @ $39 = $_____

*We are unable to accommodate children younger than 8 years old.

TOTAL AMOUNT ENCLOSED: **US $**

How did you hear about this conference?

☐ Brochure mailing ☐ Referral ☐ Search Engine

☐ ECPG Website ☐ Email ☐ Other _____

Would you like to be added to ECPG's mailing list?

☐ Yes, please ☐ No, thank you

☐ **YES! I'D LIKE TO BECOME A MEMBER OF ECPG AND SAVE ON MY REGISTRATION! (see reverse for membership form)**

- **CANCELLATION POLICY:** Refunds will be issued, less a $35 administrative fee, if received in writing by **September 9, 2022**. Refunds will not be issued after that date.
- Students must provide proof of current enrollment.
- To become an ECPG member, fill out the application on the Special Membership Offer page or visit www.evergreencpg.org/Membership.

DIETARY RESTRICTIONS and/or DISABILITIES

I have the following dietary restrictions: ☐ Gluten-Free ☐ Lactose-Intolerant ☐ Peanut Allergy ☐ Sugar-Free ☐ Vegan ☐ Vegetarian

I require the following under the Americans with Disabilities Act: _____

METHOD OF PAYMENT

☐ Visa® ☐ MasterCard® ☐ Money Order

Credit Card #: _____

Expiration: _____ CSC #: _____ Billing Zip: _____

(3 digits on back of credit card)

Signature: _____

Check # (US dollars only): _____

Make checks payable to Evergreen Council on Problem Gambling

Name on check: _____

(if different from registrant)

MAIL, EMAIL, FAX ,OR DROP OFF THIS FORM WITH PAYMENT TO:

Evergreen Council on Problem Gambling
1821 Fourth Avenue East | Olympia, WA 98506
P: 360.352.6133 | F: 360.352.4133 | info@evergreencpg.org

EVERGREEN council on problem gambling