



2010 WSBA 62nd Convention And Trade Show

June 21st to June 24th 2010

Hotel Sierra/KI Convention Center

333 Main Street

Green Bay, WI 54301

Room Reservation call: 1-800-236-3330

Room Rate: \$110.00 - 175.00 Contact hotel for room type and Rate

Ask for the Wisconsin School Bus Association Room Block

The main person on the Membership will need to fill in this main page. All additional attendees information must be filled out on second page.

FEI#: 39-1204976

CONFERENCE REGISTRATION FORM

Registration Type	How Many	Full Early Bird** Feb 1 - May 25th	Full Regular May 27th - June 1st	Amount
1st Registrant from Company or District:		\$140.00	\$155.00	
Additional registrant:		\$80.00	\$95.00	
			Sub Total:	

**** Full Registration fee includes: Pre convention seminar, all workshops, lunches, Continental breakfast, and breaks.**

Pre Convention Seminar and Workshops (Only) Fees

	How Many	Fee	Amount
<input type="checkbox"/> A. Pre Convention Seminar (Tuesday, June 22nd, 2010)		\$35.00	
<input type="checkbox"/> B. Mechanics Special (Tuesday Workshop and Exhibits Only)		\$60.00	
<input type="checkbox"/> C. Mechanics Special (Wednesday Workshops)		\$60.00	

Events

<input type="checkbox"/> D. WSBA Banquet		\$35.00	
			Total:

Physical or dietary concerns: YES NO
 If yes, please give us a brief description: _____

Cancellation/Refund Policy

If cancellation is received prior to May 31st, 2010, a full refund will be provided minus a 10% administration fee. No refunds will be provided after June, 15th 2010. All cancellation must be sent in writing to Bonnie Kuchinski at b.kuchinski@wi-sba.org.

PAYMENT INFORMATION

Please enter your First and Last name, as you would like it to appear on your name badge.

 /isa MasterCard American Express Discover

First Name: _____ Last Name: _____

Contractor/School District _____

Address: _____

City: _____ State: _____ Zip: _____

Work Phone: _____ Work Fax: _____

E-mail: _____

Credit Card Holders Information as it appears on the card

First Name: _____ Middle Initial: _____ Last Name: _____

Credit Card Number: _____

Exp Date: _____ Sec Code: _____

Signature of Card Holder: _____

Wisconsin School Bus Association
 7044 So. 13th Street
 Oak Creek, WI 53154
 Phone: (414) 908-4956, Ext. 450
 Fax: (414) 768-8001
<http://www.wi-sba.org>

EVENT SELECTIONS

Pre Convention Seminar , Workshops and Banquet



FEI#: 39-1204976

- A Pre Convention Seminar (Tuesday, June 22nd, 2010)
- B. Mechanics Special (Tuesday Workshop and Exhibits Only)
- C. Mechanics Special (Wednesday Workshops)
- D. WSBA Banquet

Attendees Information

All additional attendees information must be filled out and submitted with payment. Please fill out First and Last name as you would like it to appear on your name badge. Also, indicate below which event selections each person will be attending.

First Name:	Last Name:		
Address:	City		WI
Circle Selections:	A	B	C
First Name:	Last Name:		
Address:	City		WI
Circle Selections:	A	B	C
First Name:	Last Name:		
Address:	City		WI
Circle Selections:	A	B	C
First Name:	Last Name:		
Address:	City		WI
Circle Selections:	A	B	C
First Name:	Last Name:		
Address:	City		WI
Circle Selections:	A	B	C
First Name:	Last Name:		
Address:	City		WI
Circle Selections:	A	B	C
First Name:	Last Name:		
Address:	City		WI
Circle Selections:	A	B	C
First Name:	Last Name:		
Address:	City		WI
Circle Selections:	A	B	C

If more attendee blanks are needed please print out another form and send or fax all pages to WSBA Headquarters with the payment.