



19th Annual C.B.I.A.
Training Conference
October 31 to November 2, 2017

FESS PARKER RESORT ~ 633 E. CABRILLO BLVD.
SANTA BARBARA, CA 93103
(805) 564-4333 ~ (800) HILTONS

Questions regarding symposium/training/hotel, please contact Victoria Foster @ 714/478-7196 (or) 714/741-5569

ATTENDEE INFORMATION ONLY:

ATTENDEE Name _____
Agency _____
Address _____
City/State/Zip _____

ATTENDEE Work Number _____
ATTENDEE FAX Number _____
ATTENDEE Cell Number _____
ATTENDEE'S E-Mail _____
POST ID# -OR- last 4#s of SSN _____

SCAN/E-MAIL AS ATTACHMENT or **U.S. MAIL** or **FAX** the **CONFERENCE REGISTRATION FORM** to:

CBIA 2017 Training Conference; POB 2127 -Yorba Linda, CA 92885-1327
Voice Mail/Fax Line (24/7~Secured): 714/524-6360

(NOTE: When faxing, wait until CBIA v-message announcement ends; fax tone will activate and accept fax)

- 1) COMPLETE/PRINT/RETURN the conference registration form using one of the above options**;
- 2) Please : Only ONE attendee per registration form;
- 3) Complete ALL highlighted areas; the information on this form is for the **ATTENDEE ONLY**;
- 4) If faxing registration form & confirmation is needed, please advise contact name on cover sheet;
- 5) If no confirmation needed, registration form can be faxed without a fax cover page;
- 6) Please complete section below to RSVP for the Hospitality Night, Monday - Oct. 30 @ 5:30-PM;

***7) IMPORTANT: If the attendee is NOT a current member in CBIA, please have the attendee complete and submit their on-line membership application located on the home page at: www.scbia.com.**

NOTE: Your cancelled check is your receipt; credit card receipt(s) will be e-mailed and/or faxed.

SYMPOSIUM FEE : \$325**

**\$60 of your conference fee goes towards
your 2018 membership dues.

****REMINDER: SYMPOSIUM IS NOT
P.O.S.T. REIMBURSALE****

*If attending our Hospitality Night on Mon., 10/30 @ 5:30-PM,
please check box to RSVP and advise how many will be
attending in your party:*

Payment

Check (MAKE PAYABLE TO CBIA)

Credit Card Type _____

Card Number _____

Expiration Date (MM/YY) _____

Cardholder's Name _____

UNLESS PRIOR ARRANGEMENTS HAVE BEEN MADE WITH CBIA, PAYMENT MUST ACCOMPANY YOUR REGISTRATION FORM. Registration forms received w/o payment will not be processed until payment has been received. **CANCELLATIONS MUST BE REQUESTED IN WRITING NO LATER THAN OCT. 13, 2017 BY 5-PM. A \$50 cancellation fee will be charged AFTER the date ~ NO EXCEPTIONS. All attendees must be affiliated with a public safety agency and identification WILL BE REQUIRED at conference check in.**