

PAHRA 2010 Harrisburg Conference

February 7 - 10, 2010 Harrisburg Hilton & Towers One North Second Street, Harrisburg, PA 17101

Registration Form

FULL PACKAGE

Includes admission to all daily sessions, all scheduled events/meals, refreshment breaks, legislative reception and all conference materials.

***Members: \$250.00 Non-Members: \$285.00**

Guests: \$125.00 - Includes admission to hospitality rooms and legislative reception.

Tuesday Legislative Reception: \$70.00 - Includes admission to legislative reception only.

DAILY PACKAGE

Includes admission to one full- day of sessions, scheduled breaks and conference materials only.

***Members: \$125.00/Day Non-Members: \$155.00/Day**

**Members rate covers any person employed by a PAHRA member organization including agency staff, board members, solicitors and general counsels.*

HOTEL RATES

(Includes breakfast buffet each morning)

***Single Occupancy: \$155.00 per night**

***Double Occupancy: \$175.00 per night**

(In order to receive tax-exemption, public agencies must present valid certificate when checking into hotel)

Reservations must be made before January 7, 2010 directly with the Hilton Hotels by calling 1-800Hiltons. Ask for PAHRA Harrisburg Conference at the Harrisburg Hilton. The room rate should be as noted above. After January 7, the conference room rate **may not be available** and the hotel may not have rooms available.

(Please type or write legibly)

Name: _____ Title: _____ Nick Name: _____

Agency/Company: _____

Address: _____ City: _____ State: ____ Zip: _____

Phone: _____ Fax: _____ E-Mail: _____

Register for:

___ Full Package

___ Daily Package: (date) _____

___ Guest Package

___ Legislative Reception

(OVER)

ADDITIONAL MEMBERS OF AGENCY / COMPANY

Name: _____ **Title:** _____ **Nick Name:** _____

Register for:

- Full Package
- Daily Package: (date) _____
- Guest Package
- Legislative Reception

Name: _____ **Title:** _____ **Nick Name:** _____

Register for:

- Full Package
- Daily Package: (date) _____
- Guest Package
- Legislative Reception

Name: _____ **Title:** _____ **Nick Name:** _____

Register for:

- Full Package
- Daily Package: (date) _____
- Guest Package
- Legislative Reception

Please complete the following:

Full Registrations (Member at \$250.00)	x	No. _____	=	\$ _____
Full Registrations (Non-Member at \$285.00)	x	No. _____	=	\$ _____
Guest Registration (\$125.00)	x	No. _____	=	\$ _____
Legislative Reception (\$70.00)	x	No. _____	=	\$ _____
Daily Package (Member at \$125.00/day)	x	No. _____	=	\$ _____
Daily Package (Non-Member \$155.00/day)	x	No. _____	=	\$ _____
Total Amount Due				\$ _____

Please make a check payable to "PAHRA" and send with this form to:

PAHRA, P.O. Box 91367, Pittsburgh, PA 15221

Questions? Call PAHRA at (412) 247-0699

Cancellation Policy: A cancellation and request for refund must be made in writing. Those who submit a refund request postmarked on or before January 8, 2010 are entitled to a full refund. Anyone canceling after January 8, 2010 will receive a refund minus a \$25.00 cancellation fee. No refunds will be made after January 31, 2010. Policy also applies to those registrations faxed or mailed without checks. Registrants who do not cancel before the cut-off date will be responsible for the full amount of the registration fee regardless of attendance.