

**REGISTER NOW!**

Registration fees must accompany your registration form. Fees include access to all the day's events, speakers, workshops and materials, exhibits, lunch, refreshments throughout the day, and parking. Plus, you will be eligible to receive many special raffle prizes!

Be sure that personnel from every municipal department attend this event!

**Early-bird raffle prize:**

Register by September 14 and you will be eligible to win the early-bird raffle prize — a digital camera!



**Cancellation Policy:**

All cancellations must be *in writing*. Cancellations received on or before October 5 will be refunded in full. No refunds will be made after October 5.

For more details, call the CCM Training hotline at 203-498-3018 or you can visit us online at [www.ccm-ct.org/convention](http://www.ccm-ct.org/convention). To ensure your full participation, please notify us of any accommodation necessary for a special need.

<b>FEES</b>	CCM-Member Municipalities / LPAs	Non-CCM Member Municipalities / LPAs
<b>Per Municipal Registrant</b>		
Paid by Friday, Sept. 14	\$50 - includes parking	\$100 - includes parking
Paid by Friday, Oct. 17	\$65 - includes parking	\$130 - includes parking
On-Site Registration	\$95 - includes parking	\$190 - includes parking
<b>Students</b>	\$25	NA

Full payment must be enclosed with registration form.

**Yes, I want to attend!**

Join us for CCM's 25th Annual Convention & Exposition on Wednesday, October 24, 2007, at the Connecticut Convention Center in Hartford.

To register, please fill out and return the form below. Pre-registration must be accompanied by full payment.

Name: \_\_\_\_\_

Position: \_\_\_\_\_

Department: \_\_\_\_\_

City/Town/Organization: \_\_\_\_\_

Address: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

Vegetarian Lunch:  Yes  No

**Additional attendees from my City/Town/Organization are:**

Name: \_\_\_\_\_

Position: \_\_\_\_\_

Department: \_\_\_\_\_

City/Town/Organization: \_\_\_\_\_

Address: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

Vegetarian Lunch:  Yes  No

Please send me information on the student program.

Make checks payable to CCM and return to:



CCM Convention & Exposition 2007  
900 Chapel Street, 9th Floor  
New Haven, CT 06510