# $8^{\text {th }}$ Annual New Partners for Smart Growth Conference <br> January 22-24, 2009 

PRESS REGISTRATION FORM
Deadline: January 9, 2009
Please check one of the following:

Please type or print the information exactly as you would like it to appear on your name badge and conference materials.

| Last Name | First Name | Middle Initial |  |
| :--- | :--- | :--- | :--- | :--- |
| Title |  |  |  |
| Organization |  |  |  |
| Address | Statemale |  |  |
| City |  | Zax Code |  |
| Work Phone |  |  |  |
| Email Address |  |  |  |

I will be attending the following meal functions:
Thursday, $1 / 22$, continental breakfast
Thursday, $1 / 22$, box lunch
Thursday, $1 / 22$, networking reception
Friday, 1/23, continental breakfast
Saturday, 1/24, continental breakfast
Saturday, $1 / 24$, lunch
Dietary Restrictions: $\qquad$
Special Needs: $\qquad$

TOURS: Space for each tour is limited. You will be contacted if your tour selection cannot be given. Please refer to the web site for complete tour descriptions.

Optional Tours:
Wednesday Tours (1/21)
Tour \#1 (8:30 AM) $\quad \$ 75$
____ Tour \#2 (8:30 AM) \$60
Thursday Tours (1/22)

| Tour \#3 | (11:00 AM) | \$15 |
| :---: | :---: | :---: |
| Tour \#4 | (11:30 AM) | \$35 |
| Tour \#5 | (12:30 PM) | \$38 |
| Tour \#6 | (1:00 PM) | \$38 |
| Tour \#7 | (1:00 PM) | \$15 |

Sunday Tours ( $1 / 25$ )

| Tour \#8 | (9:00 AM) | \$15 |
| :---: | :---: | :---: |
| Tour \#9 | (9:30 AM) | \$15 |
| Tour \#10 | (10:00 AM) | \$15 |
| Tour \#11 | (10:30 AM) | \$15 |

Optional Workshops on Thursday, 1/22:
___ Promoting Healthy Eating... (12:30-5:00pm) \$45
___ Offset your carbon footprint!
TOTAL: $\qquad$

## Method of Payment for tours:

PAYMENT MUST ACCOMPANY REGISTRATION
(No registration will be processed without payment.
No Exceptions.)
$\square \quad$ Enclosed is a check for the amount indicated, payable to Local Government Commission.
$\square \quad$ Charge the fees indicated to my


MasterCard

Cardholder's name (please print)

(Credit card information must include signature and expiration date.)

Form needs to be mailed or faxed to:
Local Government Commission
Attn: Noelle Nichols
1303 J Street, Suite 250
Sacramento, CA 95814
FAX: 916-448-8246

