REGISTRATION FORM – 2008 WERC CONFERENCE – MAY 1, 2008

If you are registering multiple people, please provide a separate form for each individual, including that person's name and contact information, **and which breakout sessions** that individual will attend.

Name: _____

Organization/Firm: _____

Address: _____

Phone: _____ e-mail: _____

Please indicate which of the breakout sessions you plan to attend at the WERC conference:

10:45 First Round - A B C D E

12:45 Second Round - F G H I J

1:45 Third Round - K L M N O

Public Sector Labor Relations Conference Registration Fee:$110.00 per person

TOTAL: $ _____

Do You Have Any Specific Dietary Restrictions? _____

Make checks payable to the Wisconsin Employment Relations Commission. We regret that we are not able to process credit card payments. Registrations should be directed to:

Georgann Kramer, Office Manager
Wisconsin Employment Relations Commission
Post Office Box 7870
Madison, WI 53707-7870
Telephone (608) 266-9287 Fax: (608) 266-6930
E-mail: Georgann.Kramer@Wisconsin.gov

Cancellation Policy: Cancellations prior to April 17 will result in a full refund of the registration fee. Cancellations on or after April 17 will not result in a refund. Registrations may be transferred to other persons at any time prior to May 1, but you must advise us by April 30 of the name of the registrant and the name of the substitute.

CLE Credits will be requested. Last year's program received 7 credit hours, including 1 hour of ethics credit, for Wisconsin; and 6 credit hours, including 1 hour of professional responsibility credit, for Illinois.