

# REGISTRATION FORM

## WAPL Spring Conference

May 11-13 • Radisson Paper Valley  
333 West College Avenue • Appleton, WI 54912

Please register only one person per form.

Name (as preferred on name tags) \_\_\_\_\_

Library or Firm (30 character limit) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Email \_\_\_\_\_

Please check here if you require special meals or special accommodations to fully participate. Attach a written description of your needs. For service for TDD users, please use the Wisconsin Relay System at 1-800-937-3529.

**Deadline for advance registration:** on or before Friday, April 29, 2005 (postmark date).  
Registration after April 29 may be done at the Conference.

| Conference Fee:                          | WLA Members | WLA Non-Members |                          |
|--|-------------|-----------------|--------------------------|
| <input type="checkbox"/> Full Conference | \$55        | \$75            |                          |
| <input type="checkbox"/> Thursday Only   | \$40        | \$60            |                          |
| <input type="checkbox"/> Friday Only     | \$35        | \$50            |                          |
|  |             |                 | \$ _____<br>Fee Subtotal |

Personal members of WLA or library associations in other states are eligible to pay the "Member Rate." Also, WLA institutional members may send one staff member (who is not a WLA member) to the conference at "Member Rate." To join WLA, complete the application found at <http://www.wla.lib.wi.us/membership/> and submit with your registration.

### THURSDAY, MAY 12

- Lunch**
- Broiled Vine Ripe Tomato \$16
  - Roasted Sirloin \$15
  - Walleyed Pike Jacksonport \$17
- Includes salad, roll, beverage & dessert*

### FRIDAY, MAY 13

- Breakfast Buffet \$12
- Lunch**
- Chicken Park Avenue \$16
  - Baked Haddock \$16
  - Baked Vegetarian Lasagna \$16
- Includes salad, roll, beverage & dessert*
- \$ \_\_\_\_\_  
Meal Subtotal

**TOTAL (registration and meals):** \$ \_\_\_\_\_

Please charge to:  Mastercard  Visa Card#

Card Expiration Date:   Signature: \_\_\_\_\_

**Please return this form with payment**  
**(to cover registration fee and meals) to:**

**Wisconsin Library Association**  
5250 E. Terrace Dr., Suite A-1, Madison, WI 53718-8345  
Phone (608) 245-3640, Fax (608) 245-3646.

Must be postmarked by April 29, 2005. No refunds will be issued after May 3, 2005.

**Accommodations:** contact Radisson Paper Valley, 1-800-242-3499 (for reservations). Up to 2 persons: \$95 per day  
*Call today!*