

REGISTRATION FORM

GENERAL INFORMATION

- Registration includes all conference events including meals and evening events.
- **Register early; space is limited.**
- Registration confirmation will be mailed.

REGISTRATION FEE

- **\$50 BEFORE October 15, 2004.**
- **\$75 AFTER October 15, 2004.**

REGISTRATION OPTIONS

1. Register online at www.wisconsinforestry.org (credit card only)
2. Call Gloria Eichenseher at **608-265-2955**.
3. Complete this registration form (use black pen only for more readability) with credit card payment and fax it to **608-265-3163**.
4. Complete this registration form and mail with credit card payment OR check made payable to:
**UW-Extension, Governor's Conference on Forestry
Room 139 Pyle Center, 702 Langdon Street
Madison, WI 53706**

WORKING SESSION REGISTRATION

Pick the work sessions where you think your contributions will be most valuable. **Please select your first and second choice for a work session for BOTH days.** We will call you if we cannot accommodate your first choice. Information may be sent to you prior to the work session.

Tuesday, November 9, 2004 Work Sessions

Please indicate your FIRST choice:

- W1 Conserving Wisconsin's Biological Diversity
 W2 Enhancing Wisconsin's Urban Forests
 W3 Enhancing Assistance to Wisconsin's Private Forest Landowner
 W4 Maintaining Wisconsin's Forest-based Economy

Please indicate your SECOND choice: _____

Wednesday, November 10, 2004 Work Sessions

Please indicate your FIRST choice:

- W5 Minimizing the Threat of Invasive Exotic Species to Wisconsin's Forests
 W6 Minimizing Recreational Use Conflicts in Wisconsin's Forests
 W7 Managing the Impacts of Changes in Wisconsin's Land Use and Forest Ownership

Please indicate your SECOND choice: _____

Name (As it will appear on your nametag): _____

Title / Profession: _____

Organization / Agency / Company: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Daytime Phone: (____) _____ Email: _____

Best Method for Contacting You (circle one): Phone Email Mail

Special Dietary Needs (circle one): Vegetarian Vegan Other (specify) _____

Other Special Needs or Accommodations (please specify): _____

DISPLAY SPACE

YOUR PAYMENT WILL RESERVE YOUR SPACE.

Standard display table (8' x 30") with cloth and draping\$40 flat fee\$ _____

Optional electricity (one 20 amp. circuit)\$50 flat fee\$ _____

Optional Internet (per T-1 connection).....\$ _____

\$130 for Tuesday \$130 for Wednesday

Total\$ _____

Description of the display: _____

PAYMENT INFORMATION

Registration Fee\$ _____
(\$50 BEFORE OR ON OCTOBER 15; \$75 AFTER OCTOBER 15)

Optional Display Space Fee\$ _____

TOTAL PAYMENT DUE\$ _____

FORM OF PAYMENT

(FULL PAYMENT MUST ACCOMPANY REGISTRATION FORM)

Check Enclosed (payable to UW Extension, Governor's Conference on Forestry)

Credit Card Mastercard Visa

Credit Card Number: _____

Expiration Date: _____

Signature: _____