



Pacific Northwest Treatment-Free Beekeeping Conference Registration Form July 26, 27, 28 of 2013



Name: _____

Email Address (your email will only be used to send confirmation and relay additional information regarding the conference):

Phone Number: _____

Address: _____

Age: _____

Gender (circle one): Worker (Female) Drone (Male)

Will you be staying on campus? (circle one): Yes No

If yes, would you like to share a room? (Shared rooms have separate beds):

Yes No

If yes, name of roommate (this person MUST put you as their roommate when you register or you will be assigned separate rooms):

Are you coming with a group that you would like to share a quad with?

Yes No

If yes, names of your group: _____

Where did you first hear about this conference?

What are your expectations and desired outcomes for the conference?

If you have been to other conferences, what worked well that you would like to see at this conference?

Mail registration and check to: **or**
612 Pierce Road
Medford, OR 97504

register online at:
www.blisshoneybees.org/events.html