

OFFICIAL 2024 CONFERENCE REGISTRATION FORM - SACRAMENTO

*School Food Service Employees Only - (Industry members please contact Amber at CSNA for Registration Information 818-842-3040
Registration is NOT OPEN to non-exhibiting Industry Professionals. You must work in a school to attend if your company is not exhibiting.*

Essential Pieces! The 72nd Annual Conference & Trade Show - November 13-16, 2024

PLEASE TYPE OR PRINT. ONE REGISTRATION FORM PER PERSON. PLEASE DUPLICATE THIS FORM FOR ADDITIONAL COPIES.

| | | | |
|-------------------------------|------------------------------------------------|-----------------------------------------------------|----------------------------|
| NAME _____ | | TITLE _____ | |
| PREFERRED NAME ON BADGE _____ | | SPECIAL ACCOMMODATIONS & DIETARY REQUIREMENTS _____ | |
| DISTRICT NAME _____ | | | |
| MAILING ADDRESS _____ | IS THIS HOME OR WORK (PLEASE CIRCLE ONE) _____ | CITY _____ | STATE _____ ZIP CODE _____ |
| WORK PHONE _____ | FAX _____ | E-MAIL _____ | |

REGISTRATION FEES

| FULL CONFERENCE REGISTRANTS <i>(INCLUDES PRESIDENT'S PARTY & REGIONAL AWARDS BREAKFAST)</i> | | | | SINGLE DAY REGISTRANTS <i>(DOES NOT INCLUDE MEALS UNLESS CHOSEN AND PAID FOR BELOW)</i> | | | |
|-------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------|--------------------------------------------|----------|----------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------|--------------------------------------------|----------|
| | | | | PLEASE CHOOSE ONE DAY: <input type="checkbox"/> THURSDAY <input type="checkbox"/> FRIDAY <input type="checkbox"/> SATURDAY | | | |
| If PAYMENT IS RECEIVED | EARLY DISCOUNT FEE <i>(ON OR BEFORE 9/16/24)</i> | REGISTRATION FEE <i>(AFTER 9/16/24)</i> | AMOUNT | If PAYMENT IS RECEIVED | EARLY DISCOUNT FEE <i>(ON OR BEFORE 9/16/24)</i> | REGISTRATION FEE <i>(AFTER 9/16/24)</i> | AMOUNT |
| MEMBERS (MEMBER RATE DOES NOT INCLUDE DUES) | | | | MEMBERS | | | |
| DIRECTOR/SUPERVISOR | \$340 | \$365 | \$ _____ | DIRECTOR/SUPERVISOR | \$ 150 | \$165 | \$ _____ |
| MANAGER | \$325 | \$350 | \$ _____ | MANAGER | \$ 145 | \$160 | \$ _____ |
| STAFF/STUDENT/RETIRED | \$315 | \$340 | \$ _____ | STAFF/STUDENT/RETIRED | \$ 140 | \$155 | \$ _____ |
| CSNA PAST PRESIDENT | \$ 0 | \$ 50 | \$ _____ | GUEST | \$ 115 | \$130 | \$ _____ |
| NON-MEMBERS* | | | | NON-MEMBERS | | | |
| DIRECTOR/SUPERVISOR* | \$551* | \$576* | \$ _____ | DIRECTOR/SUPERVISOR | \$200 | \$215 | \$ _____ |
| MANAGER* | \$390* | \$415* | \$ _____ | MANAGER | \$175 | \$190 | \$ _____ |
| STAFF* | \$375* | \$400* | \$ _____ | STAFF/STUDENT/RETIRED | \$170 | \$185 | \$ _____ |
| STUDENT/RETIRED/GUEST | \$345 | \$370 | \$ _____ | GUEST | \$150 | \$175 | \$ _____ |
| * INCLUDES 1 YEAR SUBSCRIPTION TO CSNA AND SNA <i>(\$211 FOR DIRECTORS AND \$65 FOR MANAGERS AND \$58 FOR STAFF)</i> | | | | MEAL FUNCTIONS (OPTIONAL, NOT ALREADY INCLUDED IN PRICE ABOVE) | | | |
| | | | | REGIONAL BRUNCH - THURSDAY, 11/14 | \$ 60 | \$ _____ | \$ _____ |
| | | | | PRESIDENT'S PARTY - FRIDAY, 11/15 | \$ 100 | \$ _____ | \$ _____ |

PRE-CONFERENCE TOUR & SPECIAL SESSIONS *(MUST BE PRE-REGISTERED TO ATTEND)*

Pre-Conference Tour Wednesday, November 13, 2024 *(MUST BE PRE-REGISTERED TO ATTEND)*

Sacramento Tour - Details TBD

\$60 \$ _____

Special Sessions: Thursday, November 14, 2024

SNS Credentialling Exam - 3:30 pm - 7:30 pm (\$225 SNA Members, \$325 Non-SNA Members - *Register Directly with SNA - www.SchoolNutrition.org*)

(Check in by 3:00 pm - Test begins promptly at 3:30 pm)

Special Sessions: Saturday, November 16, 2024

ServSafe Exam - 8:30 - 10:30 am

\$65 \$ _____

(Check in by 8:15 am - Test begins promptly at 8:30 am)

I would like to participate in the Fitness Fundraiser on Saturday, November 16, 2024 - 7:00 - 8:00 a.m. _____ (No Cost)

GRAND TOTAL REGISTRATION/MEALS \$ _____

PAYING WITH CHECK No. _____ MADE PAYABLE TO CSNA AND MAIL WITH COMPLETED REGISTRATION FORM TO:
CSNA, P.O. Box 11376, Burbank, CA 91510 | Phone: 818-842-3040 | FAX: 818-843-7423

IF PAYING WITH A CREDIT CARD, PLEASE FILL IN THE FOLLOWING INFORMATION SIGN AND MAIL OR FAX TO THE ADDRESS ABOVE.

| | | |
|--------------------------|----------------|------------------------|
| CREDIT CARD NUMBER _____ | EXP DATE _____ | BILLING ZIP CODE _____ |
| BILLING ADDRESS _____ | | |
| SIGNATURE _____ | | |

PURCHASE ORDERS WILL NOT BE ACCEPTED. REQUEST FOR REFUND MUST BE RECEIVED IN WRITING BY 9/16/24. A \$75 CANCELLATION FEE WILL BE DEDUCTED.
 CHILDREN UNDER THE AGE OF 16 YEARS WILL NOT BE PERMITTED INTO THE EXHIBIT HALL. COLLEGE STUDENTS MUST BE REGISTERED BY AN INSTRUCTOR.
 FOR FURTHER INFORMATION ABOUT THIS CONFERENCE OR TO REGISTER ON-LINE, PLEASE VISIT www.CALSNA.org