

# CODI 12<sup>th</sup> Annual Conference Registration

Salt Lake City, Utah – March 7-9, 2001

**Please Print Legibly**

Please fill out name, as it should appear on your name badge: \_\_\_\_\_

Library: \_\_\_\_\_ Title or Position: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Daytime Phone Number: \_\_\_\_\_ FAX Number: \_\_\_\_\_ epixtech Client Number: \_\_\_\_\_

Are you a CODI Member:  Yes  No E-mail (required for credit card payment): \_\_\_\_\_

Does your library hold a license through a consortium? Name of consortium: \_\_\_\_\_

Check if you have a disability requiring special materials or services. Requests for special services must be in by February 7, 2001.  
Please list items needed (you will receive a follow-up call): \_\_\_\_\_

In case of emergency during the conference, please contact: \_\_\_\_\_ Phone: \_\_\_\_\_

## Registration Fees

**Full Conference** (includes all agenda sessions, meals and breaks – March 7–9, 2001)

### Before 2/2/2001

- CODI Member \$225
- Horizon Member \$225
- Non-member \$300

### After 2/2/2001

- CODI Member \$325
- Horizon Member \$325
- Non-member \$400

### Daily Rate

#### Check which day

- |                                    |   |
|------------------------------------|---|
| <input type="checkbox"/> Wednesday | <input type="checkbox"/> CODI Member \$175    |
| <input type="checkbox"/> Thursday  | <input type="checkbox"/> Horizon Member \$175 |
| <input type="checkbox"/> Friday    | <input type="checkbox"/> Non-member \$225     |

**Meals** (Meals are included with conference registration.)

- Guest for Thursday Evening Banquet \$40
- Vegetarian  I have special dietary needs: \_\_\_\_\_

### Registration Policies

1. Early registration must be received by **February 2, 2001**. All late registrations will be invoiced with the late fee of a \$100.
2. Read form carefully. No refunds of registration fees will be made until after the conference on the condition that CODI is notified in writing before February 7, 2001. A \$10.00 processing fee will be deducted from all registration cancellations.
3. No refunds can be given for meals or extra banquet tickets cancelled on or after February 7, 2001. A \$5.00 processing fee will be deducted for all meal cancellations.
4. In order to register as a CODI or Horizon member, the year 2001 membership dues must be paid at the time of registration.
5. No receipts will be sent for pre-registration payments: a receipt will be given to you at the conference.

**Amount Enclosed** Conference Registration Fee (plus late fee if applicable): \$ \_\_\_\_\_  
Guest for Thursday Banquet \$ \_\_\_\_\_

**Total Amount Due CODI** \$ \_\_\_\_\_

My check number \_\_\_\_\_ for \$ \_\_\_\_\_ is enclosed.

Visa and MasterCard are accepted (check one) I would like to pay by  Visa  MasterCard

Account Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Name as it appears on the card \_\_\_\_\_

Signature: \_\_\_\_\_

**Credit Card services are provided through Chemeketa Community College, Salem, OR.**

### Additional Information – please check all that apply:

Library Type:  Public  School  Academic  Special  Consortium

Area of Responsibility:  System Administration  Reference/Public Services  Administration  Technical Services

epixtech Representative  School Media Specialist  Other: \_\_\_\_\_

Is this your first CODI Conference:  Yes  No

**Please return this completed form with payment made to CODI:**

Barbara Lowry, Philadelphia University, Gutman Library, Schoolhouse Lane and Henry Ave., Philadelphia, PA 19144