

North Carolina Property Mappers Association

2010 Pre-Conference Workshop Only Registration Form

Name _____

Organization _____

Address _____

City, State, Zip _____

Job Title _____

Email _____

Phone Area Code (_____) Number _____ Ext. _____

Pre-Conference Workshop Registration (October 5th-October 6th)

Please do not use this form if you are attending the conference. Workshop Registration is included in the cost for Conference attendees. Please submit one form per workshop participant.

Select your workshop(s)

I plan to attend and would like to reserve a space in the Pre-Conference Workshops (Please select EACH workshop you plan to attend)

- NC Railroads & Public Service Filings with the DOR** (Tuesday 1:00PM-3:00PM) **Fire Insurance District Maps** (Tuesday 3:00PM-5:00PM)
- Working Together: GIS/Mapping & the Assessor** (Wednesday 8:00AM-9:00AM) **NC Statewide Orthophotography 2010 Project** (Wednesday 9:00AM-10:00AM)
- Managing 1-to-Many Relationships with Arc GIS** (Wednesday 10:00AM-12:00PM)

Registration Item	Quantity	Unit Price	Total
Workshop Registration – NCPMA Member (same fee for one or both)		\$ 25	\$
Workshop Registration – Non-Member (same fee for one or both)		\$ 55	\$
<i>Make checks payable to "NCPMA"</i>		Amount Enclosed	\$

- **Cancellation Policy:** Refunds for cancellations requested more than 30 days before the event will be given in full. Cancellations between 16 and 30 days before the event will be refunded at 50%. After that date, **no refunds will be issued**. Any cancellations may substitute another person to take their spot without penalty. Those who pre-register without pre-paying and do not attend or who cancel late **will still be responsible for paying** for the registration, or whatever portion that would not be refunded, had it been pre-paid.
- Please Return this completed form **ASAP**. Please submit one form per workshop participant. Make checks payable to "NCPMA" and mail to:

Kevin Locklear, GIS Cartographer
Durham County Tax Administration
200 E. Main Street (1st Floor)
Durham, NC 27701

Registration Questions to:
kevinlocklear@gmail.com
Phone (919) 560-0333
Fax (919) 560-0414

By signing below, I acknowledge that I have read the cancellation policy above, understand it, and will comply with it. If I pre-register without pre-paying and do not attend the conference, I am still responsible for the registration fee.

Signed: _____ Date: _____