



REGISTRATION FORM

Idaho Noxious Weed Conference

January 18-19, 2017

The Riverside Hotel, Boise, ID

Please print legibly or type

Name (preferred on nametag): _____

Please note: Nametags will be required at all meetings

Company/Organization: _____

Address: _____

City, State, Zip: _____

Phone: _____

Fax: _____

E-mail: _____

\$165 conference pre-registration fee (includes all materials and breaks) –

Deadline is Wednesday, January 4, 2017

Late registration fee (after January 4) or at the door: \$190 per person

TOTAL ENCLOSED: \$ _____

Visa Mastercard Discover American Express

Card No. _____

Name on card: _____ Exp. Date: _____

Signature: _____ CVV Code: _____
(3 digit security code)

Hotel Information:
The Riverside Hotel
2900 W. Chinden Blvd., Boise, ID
1-208-343-1871
Negotiated Conference Rate:
Single: \$106 • Double: \$112
Government per-diem rate available
Reservation deadline:
Friday, December 16, 2016

Mail form and check payable to:
Idaho Weed Control Association
55 SW 5th Avenue, Suite 100, Meridian, ID 83642
Or fax to 208.888.4586

For questions:
Phone: 208-888-0988 or cindy@amgidaho.com

Office Use

Date _____
Amt _____
Ck # _____

We understand that circumstances arise that may require you to cancel. If you cancel your registration prior to five (5) business days before the meeting, your registration fee will be refunded, less \$25 enrollment charge. If you cancel five (5) business days or less before the meeting, we cannot refund your registration fee, but you may send someone in your place. *You must notify our office immediately if you will have a substitute.*