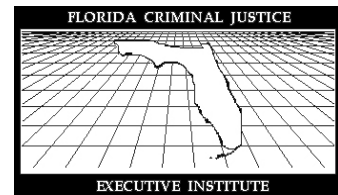




**Sixteenth Annual
Graduates Education Conference
April 25-28, 2010
Tallahassee, Florida**



Conference Registration

Full name: _____

Rank/Title: _____

First name as you would like it to appear on name badge _____

Agency _____

Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____

Email _____

Graduating Class and #: CES#____ SLP#____ FLA#____ ELS#____

Check here if this is a recent change to any of the above information.

Conference registration fee enclosed (Graduate). \$325

Conference registration fee enclosed (non-graduate). \$350

Total enclosed: \$ _____ Check or PO# _____

(A \$50 administrative fee will be retained for cancellations made after March 25, 2010)

(No refunds will be issued if cancellations are made after April 18, 2010)

(All cancellation notifications must be made in writing via e-mail to Terry Everest)

Make checks payable to **FCJEI Associates, Inc.**
FEID # 65-0593595

Payment will be mailed separately

I have reserved a room at the Residence Inn by Marriott, Tallahassee North (850) 422-0093.
(Deadline for hotel reservations is March 31, 2010)

Mail registration form with payment to: FCJEI Associates, Inc.
1227 Winfield Forest Drive
Tallahassee, FL 32317

Or **FAX** form to Attn: Terry L. Everest – terryeverest@fdle.state.fl.us
(850) 410-7345