



LIFE Summer 2005 Regional Meeting Registration

Name _____

Title _____

Organization _____

Address _____

City _____ State _____ Zip Code _____

Phone _____ Fax _____

Email _____ County _____

I would like to attend the following:

- | | | | | |
|-------|-----------|-----------------------|---------------|---|
| _____ | August 3 | Western New York | Ellicottville | Holiday Valley, Rt. 219 |
| _____ | August 4 | Central/Southern Tier | Ithaca | Hilton Garden Hotel, 130 East Seneca St. |
| _____ | August 10 | North Country | Lake Placid | Crowne Plaza, One Olympic Drive |
| _____ | August 23 | Hudson Valley | Kingston | Central Hudson, 120 Rt. 28 |
| _____ | August 24 | New York City* | Brooklyn | Key Span, One Metrotech Center |
| _____ | August 30 | Capital | Troy | Joseph L. Bruno Family Resource Center
2328 Fifth Avenue |

Billing Information:

- _____ Enclosed is a check or purchase order for \$35
- _____ Please bill my credit card for \$35 (___ MasterCard, ___ Visa, ___ American Express)
- Account number _____ Expiration date _____
- Signature _____

Please send this form to:

Jennifer Monroe, Registrar
Community Power Network of NYS (518) 251-2525 (phone)
PO Box 46 (518) 251-2524 (fax)
Olmstedville, NY 12857 lifenynews@capital.net

*For security reasons, you must pre-register for this session. We will not be able to accommodate walk-ins.