

2011 Partners Program Registration Form

Name: _____
 Address: _____
 City/State/Zip: _____
 E-Mail: (required): _____
 Phone: _____
 Cell (for contact onsite): _____

Monday, August 1, 2011 Please check your selection

8:00 a.m. **Continental Breakfast** N/C
 11:00 a.m. **Tall Ship Manitou** \$45.00
Children Attending ____ @ \$20.00

Tuesday, August 2, 2011 Please check your selection

8:00 a.m. **Continental Breakfast** N/C
 10:30 a.m. **Wine Tour/Tasting and Lunch Old Mission Peninsula** \$64.00

Wednesday, August 3, 2011 Please check your selection

8:00 a.m. **Continental Breakfast** N/C
 9:00 a.m. **Karen Buscemi, Editor of StyleLine Magazine** N/C

Thursday, August 4, 2011 Please check your selection

8:00 a.m. **Continental Breakfast** N/C

Total Amount \$ _____

Cancellation Policy: To be eligible for a full refund of fees, notification of cancellation **must be received in writing** and sent to CARregistration@cargroup.org or faxed to 734-929-0483 **by 5:00 p.m. EDT July 15, 2011**. After this date, those who cancel will not be eligible to receive a refund.

Payment Method

Cardholder name (please print): _____
 Address (if different from above): _____
 Cardholder Signature: _____
 Account #: _____
 Exp. Date: _____
 Check enclosed. No. ____ (in U.S. dollars)
 Authorized Signature (required): _____
 Print Name: _____ Date: _____