



Wetland Plants
of the
Sacramento Valley and Lower Foothill Region
Virginia Dains, Dr Bob Holland, and Dr Jeff Hart
May 20-22, 2008

Name: _____

Organization/Affiliation: _____

Address: _____

Telephone numbers: _____

Email: please print clearly: _____

REGISTRATION FEE	Fees	Amount Paid (<i>please fill in</i>)
Workshop fee for current CNPS Members	\$360	
Workshop fee non-members	\$385	
Total	Total	

Last day to cancel your registration and receive a 50% refund is May 9, 2008
After May 9, we will not be able to refund your registration fee.

PAYMENT METHOD

Check Make checks payable to **California Native Plant Society**

Credit Card (see below)

Visa/MasterCard #: _____

Name on the Card: _____

Expiration Date: _____

Signature: _____

Mail this form with payment to: California Native Plant Society
2707 K Street, Suite 1
Sacramento, CA 95816
Attn: Wetland Plants workshop

You may also FAX your form with Credit Card information to (916) 447-2727

For any questions about this or other workshops, please contact the CNPS Training Coordinator, Josie Crawford: (916) 447-2677 or jcrawford@cnps.org