

FCO Conference Registration Form

October 31-November 2, 2008

Abe Martin Lodge, Brown County, Indiana

Name _____
 Address _____
 City, State and Zip Code _____
 Phone number _____
 E-mail address _____

___	OD Registration (includes all CE, Friday lunch and Saturday banquet)	Registration \$350 Late registration \$395 (after October 15 th) 2008 graduate registration \$200.	_____
___	Student Registration	No charge (Banquet tickets are not included but may be purchased.)	N/C
___	Spouse registration	Spouse's name _____ (There is no registration charge for spouses, but don't forget to purchase a banquet ticket.)	N/C
___	Certified (TQ) exams needed?	@\$25 per course (max. of three 2-hour courses) \$25 x _____ courses = _____	
___	Extra Saturday banquet tickets for adults	@ \$15.50 per ticket for adults	_____
___	Extra Saturday banquet tickets for children	@ \$7.75 per ticket for ages 4 through 10. (3 and under, free)	_____
		Total	

At the present time we are not planning child care for during programs. However, if we were to provide this service for a cost, would you use it? Yes/No
 If so, give the ages of the children who you would be registering for child care.

Send your completed registration to:
 Dr. Mike Goen, Treasurer
 Fellowship of Christian Optometrists
 1494 Pine Lane Drive
 Cantonment, FL 32533

Don't forget to make your room reservations! Call Abe Martin Lodge at 812-988- 4418 and give them our conference rate group code of 1007F.