

ANNUAL CONFERENCE – MAY 7-9, 2025 MARRIOTT SAVANNAH RIVERFRONT-SAVANNAH GA

CONFERENCE REGISTRATION FORM Conference Registration Link: <u>https://forms.gle/8KQEKKWiqVA75N779</u>

NAME		JOB TITLE		
SCHOOL SYSTEM/COM	MPANY			
MAILING ADDRESS				
CITY	STATE	ZIP CODE		
E-MAIL		PHONE		
	ion Fee (limited to the first ation Fee includes lunch		\$ 75.00	
	Fee (includes system register the following: (all brea		\$350.00 sday, lunch on Thursday, and	
Please indicate the meal f	functions you plan to attend	d:All meals		
or only these meals:	Thursday Breakfast	Thursday Lunch	Friday Breakfast	
Please list any dietary res	trictions:			
Ple	c/o Shai 245 N Ro	m and return by April 1 AINS nna Bogeajis obinson Street		
	CONTACT	INFORMATION		
Meriwether County Scho 2100 Gason St., PO Box Greenville, Georgia 3022 706-441-0601	70 2	GAINS 245 N Robinson Stre Lenox, Georgia 3163 229-546-4094	et	
Tomecka.woody@mcssg	a.org	shanna@cpresa.org		
Hotel reservations	must be received no late	er than March 28, 202	5, for the group rate of \$212	

- per night. A block of rooms has been reserved for GAINS and these fill up quickly!
- The daily self-parking fee will be \$25.
- Video recording conference sessions is **prohibited.**
- There will be a late charge of \$25 per person after April 11, 2025. No registrations will be accepted after April 18, 2025.
- No refunds after April 18, 2025.