



**2018 Fall Forum  
October 9 & 10, 2018**

**Hilton Arden West – Sacramento  
2200 Harvard Street  
Sacramento, California 95815**

Register for the Forum Online  
[Click Here!](#)

Online Hotel Reservations  
[Click Here!](#)

**FORUM REGISTRATION FORM**

**Timely Registrations Must Be Postmarked No Later Than September 14, 2018**

**REGISTRANT** (Please Print/Type):

Name: \_\_\_\_\_

Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Organization: \_\_\_\_\_

Address: \_\_\_\_\_

**REGISTRATION & FEES:** Includes applicable meals (check applicable fee):

➤ **Discount Rate** for CADTP Organizational Members and their employees and all CADTP AOD Registered/Certified Counselors. I am a:

CADTP Certified Counselor  CADTP Registered Counselor  CADTP Organizational Member

Full Forum (Tuesday & Wednesday) @ **\$290 / person**

One Day, check one -  Tuesday or  Wednesday @ **\$150 / person**

Yes, I plan to attend the CADTP Organizational Member Reception and General Meeting on Monday, October 8, 2018 at 6:00pm

➤ **For Non-Members and Non-CADTP AOD Registered/Certified Counselors:**

Full Forum (Tuesday & Wednesday) @ **\$340 / person**

One Day, check one -  Tuesday or  Wednesday @ **\$200 / person**



California Association of DUI Treatment Programs  
1026 W. El Norte Pkwy PMB 143 Escondido CA 92026  
CADTP Organizational Membership ~ CADTP AOD Counselor Certification or Registration  
Phone: (800) 464-3597 Fax: (866) 621-2286  
Email: [info@cadtp.org](mailto:info@cadtp.org) Website: [www.cadtp.org](http://www.cadtp.org)  
Like us on Facebook and Follow us at @CADTP





## Registration Information:

- **Please** use one registration form per registrant. You may photocopy for additional registration forms.
- **Register by mail:** A completed form for each registrant and include a check/money order for the appropriate fee(s), payable to “CADTP” or with a completed credit card form and mail to:
  - CADTP Fall Forum, 1026 W. El Norte Pkwy. PMB 143 Escondido CA 92026
- **Register by fax or email with credit card:** CADTP accepts MasterCard and VISA payments. To charge, please complete the credit card information on the next page and mail, fax, or email.
- **Register online with a credit card:** <http://www.cadtp.org/upcoming-events-46>.
- **There is a 10% discount for companies that register three (3) or more employees at the same time (registrations must be received by CADTP on the same day).**
- Registrants’ guests may arrange to attend breakfasts and/or luncheons. Please call Jennifer at (559) 457-2302 no later than September 14, 2018 to arrange for guest meals.
- **Timely registrations must be postmarked no later than September 14, 2018. Those not registering in a timely fashion cannot be guaranteed space and/or materials.** Written confirmation of registration and hotel directions will be sent to those who register in a timely manner.
- There will be no refund of registration fees for cancellations received on/after September 14, 2018. Refunds will be made for cancellations received through September 14, 2018 less a \$25 cancellation fee.
- Registrants are responsible for making their own room reservations. Reserve your room no later than September 14, 2018 to obtain the conference rate. Important Note: this rate is available until the conference room block is sold out.
  - Call the Hilton Arden West at 800-559-4299 use the Code: CADTP, inform the clerk you are attending the CADTP Forum.
  - Book online at : [www.hilton.com/en/hi/groups/personalized/S/SMFHIHF-CADTP-20181007/index.jhtml?WT.mc\\_id=POG](http://www.hilton.com/en/hi/groups/personalized/S/SMFHIHF-CADTP-20181007/index.jhtml?WT.mc_id=POG)
- The conference room rate is \$129 per night for queen single/double occupancy, plus tax \$129 per night for king single/double occupancy, plus tax. Important Note: this rate is available until the conference room block is sold out.
- Unless prior written approval has been given by the CADTP Board, no attendee at the Forum is permitted to advertise its/his/her products and services, or to otherwise solicit other attendees to purchase those products and services.





**CREDIT CARD INFORMATION  
(Master Card or Visa)**

Please print or type:

Full Name (as it appears on the card): \_\_\_\_\_

Complete Billing Address: \_\_\_\_\_

Account Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ Card ID Number\*: \_\_\_\_\_

\*Card ID Number appears on the reverse side of the card as the last 3 numbers near the signature

Total Amount to be charged: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_

Daytime Phone Number (in case there is a question) \_\_\_\_\_

Note: You may register by Fax or Email only if you are paying with a credit card. Please fax the completed registration and credit card information form to (866) 621-2286 or Email to [info@cadtp.org](mailto:info@cadtp.org). This is a secured fax and email and will be received in a secure location. Credit card information will be destroyed upon successful payment.

Paying for more than one person? Please list names below and include a registration form for each attendee:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_

