

CALIFORNIA COOPERATIVE SNOW SURVEYS PROGRAM

ESTABLISHED 1929



P. O. Box 60888 Sacramento, California 95860



Meeting Registration Form

California Cooperative Snow Surveys 65th Annual Meeting

**Paso Robles Event Center, Paso Robles, CA
November 6-7, 2019**

Yes, I plan to attend the 65th Annual Meeting of the California Cooperative Snow Surveys Program at the Paso Robles Event Center November 6-7. Please have my name badge appear as shown below.

CCSS Annual Meeting Registration fee \$140 x ____ guests = \$_____ total

Please return this form directly to the Snow Surveys Section with your total registration fees. **Registration is due NO LATER than October 28, 2019.** Your receipt will be provided at the meeting.

Make checks payable to "CCSS" and mail the completed form with check to:

**California Cooperative Snow Surveys
P.O. Box 60888
Sacramento, CA 95860**

*Contact us if you wish to pay using **PayPal**.*

Attendee: _____

Telephone: (____) - _____

Title: _____

Organization: _____

Address: _____

Email Address: _____

Check # _____ Amount : _____ Total Attendees _____

If you are registering more than one person, please list each name and email address below:

Name Email Address

Name Email Address

Name Email Address

Name Email Address