



Registration Form

2010 Pacific Region Fall Meeting

November 13, 2010

Shilo Inn - Suites and Hotel

3350 Gateway

Springfield, OR 97477

Please complete this form for each attendee.

Name: _____ Date: _____

Address: _____

City, State, Zip Code: _____

Email Address _____

Phone (optional) _____

_____ \$35.00 per attendee

_____ \$3.00 Judges Refresher (optional and can be paid at the meeting)

_____ Total

Make check payable to: American Daffodil Society

***Early registration: Those postmarked by August 15, 2010 will receive a packet of Autumn Flowering Daffodils.**

Mail the Registration Form to:

**Jon Kawaguchi
Pacific Region Fall Meeting
c/o 3524 Bowman Ct.
Alameda, CA 94502**