



2011 AGS Southern Region Fall Conference
 Saturday, October 29, 2011
 Hosted by Sigma Kappa, College of the Canyons

REGISTRATION FORM

Registration and Continental breakfast, 7:30 a.m. to 9:00 a.m.
 General Sessions, Workshops, and Lunch, 9:00 a.m. - 3:00 p.m.

College _____ Chapter _____

Name of Advisor Attending (*please print clearly*) _____

MANDATORY REQUIREMENT. No student will be admitted without an advisor present. This will be STRICTLY ENFORCED.

Contact Information:

E-mail _____ Phone _____

ATTENDEES Last Name, First name (<i>please print clearly</i>)	A = Advisor S = Student (<i>Circle one</i>)
1.	A S
2.	A S
3.	A S
4.	A S
5.	A S
6.	A S
7.	A S
8.	A S
9.	A S
10.	A S

By signing here I agree to attend the conference with these students:

 Advisor's signature (mandatory; registration will not be processed if this is missing!)

Total number of attendees _____ X \$30.00 = _____ amount enclosed.

Please make college checks or money orders payable to *COC - ASG (*Please Note ASG is our associative student government*)* and mail to:

College of the Canyons c/o Meghan Andrade - Alpha Gamma Sigma,
 26455 Rockwell Canyon Road,
 Santa Clarita, CA 91355

Deadline for Registration: Friday, OCTOBER 14, 2011
ABSOLUTELY NO REFUNDS AFTER THIS DATE.

If you register by this date you are obligated to pay regardless of attendance