

To Register, please complete this form and forward with payment by mail or fax with credit card information to:
 Evolution Registration 1018 Sweet Juliet Way, Greer, SC 29650
 1-616-481-6057/ FAX 1-864-479-0680 Email Questions to help@c4recovery.org

SYMPOSIUM REGISTRATION FEES

Symposium Registration fees (Thursday evening through Sunday noon) include all presentations, Friday Luncheon, Friday Evening Event, Saturday Luncheon, all Coffee/Beverage Breaks and all Snack Breaks.

MAIN SYMPOSIUM (Thurs Evening – Sunday Noon)

- Early Registration through 1-2-19 \$395
- Registration On / After 1-3-19 \$450
- Group Registrant Registration Fee: (4 or more registrations received together)
 - Early Group Registration through 1-2-19 \$370
 - Group Registration On / After 1-3-19 \$425

SPECIAL OFFERINGS & OPTIONS (separate from Evolution Event)

- Intensive Learning Psychotherapy Workshop (Workshop #100)
 Thursday January 24, 8:30 AM – 5:00 PM \$225
- Intensive Learning Ethics Workshop (Workshop #101)
 Thursday January 24, 8:30 AM – 5:00 PM \$125
- Faces & Voices of Recovery Ambassador Training (Workshop #103)
 Thursday January 24, 1:00 PM – 5:30 PM \$50
- Faces & Voices of Recovery Evening Event (Workshop #199)
 Thursday January 24, 6:30 PM – 9:00 PM \$100
- Faces & Voice of Recovery ARCO Training (ARCO Members Only)
 Friday, January 25, 8:30 AM – 5:45 PM \$200
 Saturday, January 26, 8:30 AM – 12:30 PM

TOTAL: _____

NAME BADGE Please print your name, organization, city and state to appear on your name badge:

Name _____
 Credentials _____
 Company _____
 Title _____

MAILING ADDRESS

Street _____
 City/State/Zip _____
 Phone _____ Fax _____
 E-Mail _____

PAYMENT INFORMATION

CHECK # _____ Please make check payable to **C4 West Coast, LLC**
 All cancellations MUST be submitted in writing, telephone requests WILL NOT be honored. Cancellations received more than 30 days prior to the symposium, paid or unpaid invoices, will incur a \$35.00 administrative fee. Cancellations received 14 to 30 days prior to the event, paid or unpaid invoices will be refunded at 50% of the invoice. No refunds will be given for cancellations received within 14 days of the symposium and all unpaid invoices will be due in full. Refunds will be sent or credited within four to six weeks after the conference has concluded.

CREDIT CARD Visa Mastercard American Express Discover

Card # _____ Expiration Date _____
 Street/City/State/Zip _____

(For bank verification purposes, please include the address where you receive your credit card statement.)

Signature _____

Please Check the Workshops you Plan to Attend.

EVOLUTION EVENT WORKSHOP SELECTION

FRIDAY, JANUARY 25

- AM Plenary #200
- Mid-Morning Workshops #225 OR #226 OR #227 OR #228 OR #229
- Luncheon Plenary #250 (Complimentary—pre-registration required)
- Early Afternoon Workshop #251 OR #252 OR #253 OR #254 OR #255
- Late Afternoon Workshops #275 OR #276 OR #277 OR #278 #279
- Friday Evening Event #299

SATURDAY, JANUARY 26

- AM Plenary/Workshop #300 OR #320
- Mid-Morning Workshops #325 OR #326 OR #327 OR #328 OR #329 OR #340
- Luncheon Plenary #350 (Complimentary—pre-registration required)
- Early Afternoon Workshop #351 OR #352 OR #353 OR #354 OR #360
- Late Afternoon Workshops #375 OR #376 OR #377 OR #378 OR #380

SUNDAY, JANUARY 27

- Morning Workshop #400
- Closing Plenary #450