



# OAMCCC FALL CONFERENCE

## OCTOBER 3-5, 2018

### REGISTRATION FORM

**NEW CLERK of COURT in 2018? (YES / NO) \_\_\_\_\_**

**Please Indicate the Number of Persons Attending:**

- \_\_\_\_\_ MEMBERS OF OAMCCC \$ 250.00  
 This is a **Per Person Fee** and includes all three (3) days of Education **and** Wednesday & Thursday lunches)
- \_\_\_\_\_ MEMBERS OF OAMCCC \$ 100.00  
 This is a **Per Day Fee** for those who **cannot** attend all three days of the Conference. **Please circle the day/s you will be attending.** NOTE: Includes lunches scheduled for the day/s you will be attending. **WED THU FRI**
- \_\_\_\_\_ NON-MEMBERS OF OAMCCC \$ 400.00  
 This is a **Per Person Fee** and includes all three days of Education **and** Wednesday & Thursday lunches)
- \_\_\_\_\_ NON-MEMBERS OF OAMCCC \$ 200.00  
 This is a **Per Day Fee** for those who **cannot** attend all three days of the Conference. **Please circle the day(s) you will be attending.** NOTE: Includes lunches scheduled for the day/s you will be attending. **WED THU FRI**

COURT NAME: \_\_\_\_\_

**ATTENDEE NAME(S) AND LUNCH RESERVATIONS: (attach additional sheet if necessary)**

NAME	DAYS YOU WILL ATTEND LUNCH	
	WED _____	THURS _____
	WED _____	THURS _____
	WED _____	THURS _____

**PLEASE COMPLETE THIS FORM AND MAIL, E-MAIL OR FAX IT ON OR BEFORE FRIDAY, SEPTEMBER 21, 2018. WE NEED THIS INFORMATION AHEAD OF TIME FOR SCHEDULING PURPOSES WITH OUR VENUE. PLEASE SEND US THIS FORM PRIOR TO SENDING PAYMENT. THE FORM MAY BE MAILED, E-MAILED OR FAXED TO JIM LINK AT THE ADDRESSES BELOW.**

**PAYMENT DUE DATE: MONDAY, OCTOBER 1, 2018**

**PLEASE MAKE CHECKS PAYABLE TO: "OAMCCC"**

**Mail to:** OAMCCC – Jim Link, Treasurer  
 % Lima Municipal Court  
 109 N Union St  
 Lima OH 45801-4929

**Contact:** [jim.link@cityhall.lima.oh.us](mailto:jim.link@cityhall.lima.oh.us)  
**Phone:** (419) 221-5238  
**Fax:** (419) 998-5517

**TOTAL AMOUNT ENCLOSED: \$ \_\_\_\_\_**