



Wisconsin Coroner's and Medical Examiner's Association

*Registration Form June 2019 Annual Conference in Wisconsin Dells, WI -
Conference Dates June 10 - 12, 2019*

Name & Title: _____

!!! PLEASE TYPE OR PRINT CLEARLY!!!

Organization: _____

Address: _____

City: _____ State: _____ ZIP: _____

Phone: _____ FAX: _____

Email: _____

FEES:

Full Conference: _____ \$250.00 Member _____ \$275.00 Non-Member

Single Day: *Indicate The Individual Day You Wish to Attend:*

Monday: _____ \$125.00 Member _____ \$150.00 Non-Member

Tuesday: _____ \$125.00 Member _____ \$150.00 Non-Member

Wednesday: _____ \$50.00 Member _____ \$75.00 Non-Member

I WILL ATTEND THE BOD MEETING SUNDAY EVENING: _____

Annual WCMEA Banquet Tuesday Evening: Indicate if you plan to attend: ___ Yes ___ No

If bringing a guest: # of guests _____ x \$25.00 each = _____ (*please enclose payment*)

The conference is being held at: Chula Vista Resort
2501 River Road
Wisconsin Dells, WI 53965 Ph. 866-990-7174

The WCMEA has a block of rooms reserved for the conference. Please call 866-990-7174 to reserve a room from the block ID G61827. Reservations need to be made **NO LATER THAN May 27, 2019** After that date, the block of rooms will be released and there is no guarantee that a room will be available.

C/o Rory Groessl, Treasurer

50 Villa Heights Court, Algoma, WI 54201

Make checks payable to: WCMEA

*****Registration deadline is May 27, 2019*****

**A \$25 fee will be charged for late registrations. Refunds for cancellations after May 21st will result in a 50% refund ONLY. For additional question contact Barry Irmen at irmen@countyofdane.com*