



CONFERENCE REGISTRATION FORM

TEXAS OUTDOOR WRITERS ASSOCIATION 57th ANNUAL CONFERENCE

Thursday Feb. 26 – Sunday March 1, 2015

Radisson Hotel Corpus Christi Beach

3200 E. Surfside Boulevard, Corpus Christi Texas, 78402

Now spouse registration is **FREE** with member registration.

Join us for the 2015 conference on the beach in beautiful Corpus Christi to learn the latest techniques and tricks of the trade, win exciting prizes, see the show and tell of new products, or experience the best of what Corpus Christi has to offer and just relax and recharge.

Active, Active-Retired and Life members who register by Feb. 6 receive a goody bag with great gifts and an exclusive 2015 TOWA conference T-shirt.

And don't forget about the early-bird signup – Active, Active-Retired and Life members who pay both their annual TOWA dues and conference registration fee by Feb. 6, 2015 are eligible for the Pick of the Litter drawing to be held Saturday night. The winner may choose any auction item before the bidding begins.

See you there.

3 Ways to Register

Mail your completed form (see reverse side) to: TOWA, P.O. Box 151293, Austin, TX 78715.

Fax or email your form to the association office at (512) 358-8010 or towa@towa.org.

Register by phone by calling (512) 358-8000 during business hours.

Hotel Information

The Radisson Hotel Corpus Christi Beach is offering the special room rate of \$95 per night to TOWA members. Just use the promotional code TOWA15 when calling or when making reservations on the website. Deadline to receive the special rate is Thursday, Feb. 12th.

Call: (361) 883-9700 or Visit: <http://www.radisson.com/corpus-christi-hotel-tx-78402/txcampus>

**TEXAS OUTDOOR WRITERS ASSOCIATION
57th ANNUAL CONFERENCE**

**CONFERENCE
REGISTRATION FORM**

MEMBER REGISTRATION*

(NAME-PLEASE PRINT)

(EMAIL ADDRESS)

PLEASE INDICATE
MEAL FUNCTIONS
ATTENDING HERE:

Conference Registration Fee: **\$175.00**
(INCLUDES ALL MEALS)

Thursday Reception

Friday Breakfast

Friday Lunch

Friday Dinner & Roast

Saturday Breakfast

Saturday Lunch

Saturday Awards Banquet

Sunday Breakfast

TOTAL \$ _____

SPOUSE REGISTRATION

(NAME-PLEASE PRINT)

(EMAIL ADDRESS)

PLEASE INDICATE
MEAL FUNCTIONS
ATTENDING HERE:

Conference Registration Fee: **FREE**

Thursday Reception **FREE**

Friday Breakfast **\$25**

Friday Lunch **\$35**

Friday Dinner & Roast **\$55**

Saturday Breakfast **\$25**

Saturday Lunch **\$35**

Saturday Awards Banquet **\$55**

Sunday Breakfast **\$25**

TOTAL \$ _____

Please pre-order spouse meals when registering for conference to ensure availability.

Please contact association office if you have dietary restrictions or to purchase additional meals.

*2015 dues must be current to attend conference.

MEMBER CONFERENCE REGISTRATION: 175.00 Please complete form for each member registered.

SPOUSE MEALS: _____

TOTAL \$ _____

Check enclosed: OR Charge my:

Visa, MasterCard, American Express, or Discover Card

Name (as it appears on card): _____

Card Number: _____

Expr. Date: ____/____/____ Credit Card Code: _____

Card Billing Address: _____

City: _____ State: _____ Zip Code: _____

Signature: _____