

Please mail your completed form and payment to:

SMCPAAA 2019 Convention
 ATTN: Charlotte Lund - Registration
 2300 IH-35 S
 San Marcos, TX 78666
www.texascpaaa.org



For more information, contact:

Cookie Baggett
 817-800-0716
 bbaggett@wellmed.net
 ~OR~
 Pina Rodriguez
 562-833-7459
 prodriguez@sanmarcostx.gov

**2019 Texas CPAAA Convention & Law Enforcement Training
 REGISTRATION FORM (complete 1 form per person)**

The San Marcos CPAAA is very excited to host the **27th Annual TCPAAA Convention & Law Enforcement Training** from **August 4-7, 2019** at the [Embassy Suites Hotel, Spa and Conference Center](#) in San Marcos, Texas! Please join us for 3 full days of classes, training and fun.

Note: A special room rate of \$135.00 plus tax per night has been arranged with the Embassy Suites. To receive the special rate, contact Embassy Suites by phone at 1-800-362-2779 and advise the hotel you are with the Texas Citizen Police or TCPAAA 2019. Reservations must be made by July 5, 2019 to receive the special convention rate.

***Registrants are responsible for hotel reservations and cancellations.**

NAME:

TITLE/ORGANIZATION:

MAILING ADDRESS:

CITY/STATE/ZIP:

EMAIL ADDRESS:

PHONE: ALTERNATE PHONE:

WHAT TCPAAA REGION ARE YOU IN? (See map page 2)

Region 1-6: _____

DELEGATE

CPAAA Delegate: ___Yes ___No

You are a delegate if you are selected to represent your alumni and/or region. (1 alumni member, 1 sworn officer)

Please indicate which activities you would like to register for:

Full Registration Fee: Includes all classes, FREE complimentary breakfasts , 2 lunches, 1 banquet, and the \$10 Texas State CPAAA membership fee Please list any special food requirements: _____	\$125	<input type="checkbox"/>
Late Fee*	\$50	<input type="checkbox"/>
TCPAAA membership dues (only if not attending the convention)	\$10	<input type="checkbox"/>
Meal Tickets (non-conference guests):		
Monday – <input type="checkbox"/> Lunch \$40	\$ _____	<input type="checkbox"/>
Tuesday – <input type="checkbox"/> Lunch \$40	\$ _____	<input type="checkbox"/>
Wednesday - <input type="checkbox"/> Awards Banquet \$55	\$ _____	<input type="checkbox"/>
Exhibit Hall Table (one table, 2 chairs) 10x10 area - Limited to 14 booths Vendor packet available for electrical and other servicing needs	\$35	<input type="checkbox"/>
Exhibit Hall Table (one table, 2 chairs) hallway space FOR-PROFIT – Limited to 10 tables	\$75	<input type="checkbox"/>

Total Remitted: \$ _____

*Please make checks payable to “SMCPAAA 2019 Convention”.

*Registration and payments received after June 21, 2019 must include a \$50.00 late fee.

*All cancellations must be in writing by July 12, 2019 and refunds are subject to \$15.00 fee.

OFFICE USE ONLY

Received: _____ Check# _____ Confirmation Mailed _____

Refund Date: _____ Refund Amount: _____

