

## 2012 CCSI CROWNVENTION Registration Form

### *Holiday Inn, New Cumberland PA, March 21-24, 2012*

Name \_\_\_\_\_ ECBA# \_\_\_\_\_ BCCA# \_\_\_\_\_ CCSI# \_\_\_\_\_ (\*) Age \_\_\_\_\_  
 Address \_\_\_\_\_ E-mail \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_  
 Additional Registrants \_\_\_\_\_ (\*) Age \_\_\_\_\_  
 \_\_\_\_\_ (\*) Age \_\_\_\_\_

Registration Fees: **All attendees must register, which includes admission and hospitality Thursday, Friday & Saturday.** Tables are not included with registration and must be reserved separately. Registration for those age 12 and under is free with paid adult. (Must have a badge to partake of hospitality-please include above so we can prepare a badge).

**Payment must accompany registration form to hold table(s).**

\_\_\_\_\_ Registration (Trade Floor & Hospitality admission-no table) \$10/person \$ \_\_\_\_\_  
 \_\_\_\_\_ Tables (\$12 each, max 3/person prior to 2/25/12) \$ \_\_\_\_\_  
 \_\_\_\_\_ Tables (\$20 each, max 1/person POSTMARKED 2/25/12 or later-IF AVAILABLE) \$ \_\_\_\_\_  
 Total show registration: \$ \_\_\_\_\_

\_\_\_\_\_ I plan to attend the Saturday night dinner at ABC and Open House (number attending) \_\_\_\_\_

Preference for table location: \_\_\_\_\_ Main Ballroom \_\_\_\_\_ Courtyard \_\_\_\_\_ Ballroom Adjoining Courtyard  
 Tables will be assigned on a first come-first served basis

I would like my table next to: \_\_\_\_\_ I would like electricity \_\_\_\_\_

Due to a limited number of electrical outlets, they will be available on a first come, first served basis.

(\*) The legal age for consumption of alcohol in the state of PA is 21. All persons under 21 will be issued a non-drinking badge.

#### Hotel Registration Information

Room Rates: \$83 per night plus tax, double or single. **Check in time is 4 PM, no earlier.** Rooms can be paid by cash at the time of check-out, but must be held using a credit card.

Credit card type: VISA MASTERCARD DISCOVER

Credit Card number \_\_\_\_\_ Exp. Date \_\_\_\_\_ / \_\_\_\_\_

One night deposit or credit card required to hold room beyond 6:00PM day of arrival.

Type of room desired (please circle): SMOKING NON-SMOKING SINGLE DOUBLE

I am rooming with: \_\_\_\_\_ Please **circle** the nights you would like to stay:

Monday March 19 Tuesday March 20 Wednesday March 21 Thursday March 22 Friday March 23 Saturday March 24

Make checks for Show Registration payable to **Jeff Lebo**, and checks for hotel registration payable to **Holiday Inn**. Please mail along with this form to:

**Jeff Lebo, 350 Roxberry Rd., York Haven, PA 17370-9230.**

**Deadline for registration is February 25, 2012.**

For more information on the show, visit [cansmartbeercans.com](http://cansmartbeercans.com) or [Eastcoastbrew.com](http://Eastcoastbrew.com)

Questions? Call Jeff Lebo at (717) 938-2875 [jeffersonpepper@aol.com](mailto:jeffersonpepper@aol.com) or Larry Handy (215) 412-2344 [OhHugo1@aol.com](mailto:OhHugo1@aol.com)