

**Food and Nutrition Services Employment and Training Kick-Off Planning Event
 Sheraton Four Seasons
 Greensboro, North Carolina
 September 28 - 30, 2015**

REGISTRATION FORM

Fax To: Joan Otto @ (919) 334-1265
Email To: joan.otto@dhhs.nc.gov
 (Confirmation will be provided for registrations received via email only)

*******REGISTRATION DEADLINE - No later than September 14, 2015*******

County: _____ **Date:** _____

Completed By: _____ **Phone #:** _____

The following staff will attend the FNS E&T Kick-Off Planning Event:

(Please print legible. This list will be used to make name badges for attendees.)

<u>Name (Please print or type)</u>	<u>Title</u>	<u>9/28/15 Overnight Stay Y or N</u>	<u>9/29/15 Overnight Stay Y or N</u>	<u>Disability Accessible Room Y or N</u>	<u>9/29/15 Breakfast Y or N</u>	<u>9/29/15 Lunch Y or N</u>	<u>9/30/15 Breakfast Y or N</u>	<u>Requesting Vegetarian Y or N</u>

Additional staff requested if space available (State DSS will notify you if these additional staff can be accommodated):

Rooms will be paid directly by the State; however, the State will not pay for incidentals such as telephone charges, in-room movies, or room service. Individuals will be required to present a credit card at check-in to cover incidental charges.