

**2008 Cocaine Anonymous World Service Conference
NON-DELEGATE CREDENTIAL REGISTRATION FORM**

Date: _____, 2008

NON-DELEGATE INFORMATION

Name (please print): _____

Address: _____

City: _____ State/Province _____ Zip: _____ Country: _____

Telephone: (____) _____ - _____ Email: _____

Name of Region: _____

Name of Area: _____

How would you like your badge to read? _____

(Please print CLEARLY)

- | | |
|---|--|
| 1. Are you a former/present Delegate/Trustee Non-Delegate Chair/WSO office member? | <i>(Indicate Here)</i>
_____ |
| 2. Do you carry any votes? If yes how many? Indicate how many_____. | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 3. How many conferences have you attended? | _____ |
| 4. Do you plan to serve on a Committee at the Conference? If have you answered yes, please indicate which one in the space below. | <i>(Check One)</i>
Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 5. Would you be willing to do service in the Business Office at the conference? If you responded YES, please, indicate the best way to contact you. Please print clearly. | <i>(Check One)</i>
Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 6. If you have email, would you like to receive your delegate mail electronically? If you checked YES, please PRINT your address below. | <i>(Check One)</i>
Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 7. Would you like lead a 12-Step meeting at the Conference? | <i>(Check One)</i>
Yes <input type="checkbox"/> No <input type="checkbox"/> |
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NOTE: In order to offset the high cost of preparing and putting on the conference, we are continuing to institute a \$5.00 registration fee per registrant. Please note, we will not be able to process your registration until this fee is paid. ONLY checks or money orders (no credit cards) will be accepted for payment, made payable to CAWSO. *Thank you for your cooperation.*

All Registration Forms need to be completed and mailed to the WS office by May 1, 2008

C O N F E R E N C E C H A I R — 2 0 0 8 D E L E G A T E R E G I S T R A T I O N

c/o CAWSO 3740 OVERLAND AVE. SUITE C, LOS ANGELES, CA 90034