

CALIFORNIA FEDERATION of BUSINESS & PROFESSIONAL WOMEN
105th Annual Conference
May 16-18, 2025 – Marriott Courtyard Burbank
CFBPW REGISTRATION FORM

PLEASE PRINT ALL INFORMATION – Please, one form for each person attending

FIRST NAME: _____

LAST NAME: _____

E-MAIL _____

PREFERRED PHONE: _____

_____ *will be attending via Zoom and understand the registration fees below apply.*

May 16-18, 2025 – Annual Conference Registration

2024-2025 STATE POSITION: (Please check only one.)

State Officer: _____

Standing Chair: _____

Member: _____

Past State President: _____

Special Chair: _____

First Timer: _____

District President or Alternate: _____

District Representative: _____

Guest *: _____

** Note: Guests do not pay the registration fee...only meals and any late meal charge incurred.*

REGISTRATION: (FOR ALL, IN PERSON OR VIA ZOOM)

Zoom Registration –

\$ 50 _____

In-Person Registration

Early Bird – Received on or before Monday May 6, 2025

\$ 45 _____

Received Between– May 6 and May 12, 2025

\$ 50 _____

Received (email, fax or telephone) after May 12 and onsite

\$ 60 _____

MEALS – (Please select)

Friday Lunch – Turkey-Provalone Wheat Wrap

\$45 _____

Friday Installation Banquet – Chicken Cordon Bleu

\$55 _____

Saturday Lunch – Chicken Picatta

\$45 _____

Plus \$5 late fees for each meal received after May 6

\$ _____

TOTAL AMOUNT ENCLOSED – PLEASE MAKE CHECK PAYABLE TO: CFBPW

\$ _____

POST CONFERENCE BOARD OF DIRECTORS REGISTRATION -
POST CONFERENCE BOARD REGISTRATION IS INCLUDED IN CONFERENCE REGISTRATION.
HOWEVER, PLEASE INDICATE YOUR PARTICIPATION

2025-2026 STATE POSITION: (Circle Only One)

State Officer: _____

Standing Chair: _____

Member: _____

Past State President: _____

Special Chair: _____

First Timer: _____

District President or Alternate: _____

District Representative: _____

Guest *: _____

MAIL CHECK, MADE PAYABLE TO CFBPW, AND THIS FORM TO:

Katherine Winans – CFBPW Registration

1171 Chaparral Court, Minden NV 89423

PHONE/FAX NUMBER:

775 267 0539

YOU MAY PAY USING ZELLE. SET THIS UP THROUGH YOUR BANK ONLINE. NO FEES CHARGED.

SEND THROUGH ZELLE USING THIS EMAIL: bpwvsd@gmail.com

With Zelle payments you still need to mail or email the registration form as above.

SPECIAL REQUIREMENTS:

____ If you have a disability and require accommodation to fully participate in this activity, please check here.
You will be contacted to discuss your specific needs.

____ If you have dietary restrictions, please let us know: _____