



**Conference Registration 2008 Right of Way Statewide Training Conference
October 15 & 16, 2008**

Please fill in completely and legibly - information will be used for badges and registration lists. Please indicate:

- ODOT Right of Way employee (Complete Section A and C)
- ODOT employee*, Local Public Agency (Complete Section A, B and C)
- Consultant (Complete Section A, B and C)

* (All non-Right of Way employees at headquarters and regions).

A. Name _____

Title _____

Agency/Company Name _____

Street Address (include room or suite number) _____

City/State/Zip _____

Phone _____ Fax _____ E-Mail _____

**B. CONFERENCE REGISTRATION FEES:
ODOT EMPLOYEES (Non-Right of Way), LOCAL PUBLIC AGENCY EMPLOYEES & CONSULTANTS ONLY)**

\$ 125

PAYMENT

- Check (payable to "ODOT" and attach to the registration form)
- Cash (please do not send cash through the mail)

C. Please mail, fax or deliver in person to:

ODOT Right of Way Section
 Attn: Dale Shafer
 355 Capitol Street NE Room 420
 Salem, OR 97301-3871
 Tel: 503.986.3629
 Fax: 503.986.3625

 FEI #93-1111585-20

Registration Substitutions:

You may substitute for registered participants at any time. Please fax any substitutions to Dale Shafer at 503.986.3625 or email to Dale.R.SHAFER@odot.state.or.us

- Office Use Only -

Database

Payment

Check #: _____

Amount: _____