



**California Association of Meat Processors Convention  
Registration  
Operator/Allied Member  
February 21<sup>st</sup>-23<sup>rd</sup>, 2025**

Company Name: \_\_\_\_\_  
 City/State: \_\_\_\_\_  
 Contact, Phone # & Email Address: \_\_\_\_\_

**PLANT REGISTRATION**

Registration fees include admittance to all convention activities & Meals. Print all names as you wish them to appear on your name tag. Must return by February 1<sup>st</sup>, 2025.

1 \_\_\_\_\_ 4 \_\_\_\_\_  
 2 \_\_\_\_\_ 5 \_\_\_\_\_  
 3 \_\_\_\_\_ 6 \_\_\_\_\_

**Plant Registration**      Before 2-01-25      After 2-01-25  
 \$125.00 \_\_\_\_\_      \$200.00 \$ \_\_\_\_\_

**MEAL TICKET MUST BE PRE PAID**

	# Attending	Before 2-01-25	After 2-01-25	\$\$ Enclosed
Fri – Lunch @ Chico State	_____	\$15 each	\$25	\$ _____
Kids (age 10 or under)	_____	\$5 each	\$15	\$ _____
Sat – Lunch @ Chico State	_____	\$15 each	\$25	\$ _____
Kids (age 10 or under)	_____	\$5 each	\$15	\$ _____
Sat – Awards Banquet	_____	\$25 each	\$35	\$ _____
Kids (age 10 or under)	_____	\$5 each	\$15	\$ _____

**TOTAL DUE FOR CONVENTION REGISTRATION and MEALS:**      \$ \_\_\_\_\_

**Deadline for Pre-registration February 1<sup>st</sup>, 2025**

Make Checks payable to: **CAMP 12711 E. Whitetail Dr, Athol ID 83801, 916-223-1840**  
 Or email to **campvicki777@gmail.com**

Name on Credit Card \_\_\_\_\_  
 Credit Card Number \_\_\_\_\_  
 Expiration Date \_\_\_\_\_ 3 Digit Code \_\_\_\_\_  
 Billing Address \_\_\_\_\_