



California Association of Directors of Activities  
Area "A" Advisor Workshop

***"BECOME A 007 ACTIVITIES DIRECTOR"***

**South Tahoe Middle School**

**South Lake Tahoe**

***Saturday & Sunday, August 28-29, 2010***

**This advisors' conference will be designed to meet the individual needs of those in attendance! Include your needs on the bottom of the attached registration form!!!**



**Registration Rate - August 23rd,  
\$80 CADA member, \$100 Non-CADA member**

**\*\*\*Book Own Room\*\*\***

**All attendees will now be responsible for booking their own rooms for this conference!! (Just like CADA)**

**Hotel suggestions:**

**Lakeshore Lodge and Spa (530) 541-2180**

**Embassy Suites (530) 544-5400**

**Inn By The Lake (530) 542-0330**

Conference will begin at 12:30 pm on Saturday (join us for lunch) and end on Sunday at 12:30 pm. Several of us will be on hand Friday evening to kickoff the workshop. Saturday dinner will be an optional group dinner. Details will be discussed at the conference.

For more information:

Allison Gadeke (209) 607-9093

[agadeke@lused.net](mailto:agadeke@lused.net)

**Registration Form – Tahoe Adult Advisor Conference  
August 28-29, 2010**

**Complete and return this form to Lori Sato, PO Box 354, Citrus Heights, CA 95611. Please make checks payable to CADA.** For more information, please contact Allison Gadeke Phone (209-607-9093 **No purchase orders accepted.** We regret that refunds can not be given. If you would like to pay your CADA Registration at this time, please make out a separate check for CADA dues. A confirmation email will be sent once your registration has been received.

Name: \_\_\_\_\_ School: \_\_\_\_\_  
(List additional names on back.)

School Address: \_\_\_\_\_ City: \_\_\_\_\_

Zip: \_\_\_\_\_ Phone #: (\_\_\_\_) \_\_\_\_\_ e-mail: \_\_\_\_\_

Home address: \_\_\_\_\_ City: \_\_\_\_\_

Zip: \_\_\_\_\_ Phone #: (\_\_\_\_) \_\_\_\_\_ e-mail: \_\_\_\_\_

**Registration for CADA member:**

\_\_\_\_\_ # of attendees x \$80 (discount reg.) postmarked by Aug. 23 = \_\_\_\_\_

**Registration for NON-CADA member:**

\_\_\_\_\_ # of attendees x \$100 (discount reg.) postmarked by Aug. 23 = \_\_\_\_\_

***CADA DUES (if applicable): Enclose separate check for dues.***

***\$100 individual or \$230 school membership*** = \_\_\_\_\_

TOTAL AMOUNT ENCLOSED: \_\_\_\_\_

(Make checks payable to CADA)

Check #(s): \_\_\_\_\_

**List topics you would like to see covered:**

- A.
- B.
- C.

**Registration Form – Tahoe Adult Advisor Conference  
August 28 - 29, 2010**

Additional attendees:

Name: \_\_\_\_\_ School: \_\_\_\_\_

School Address: \_\_\_\_\_ City: \_\_\_\_\_

Zip: \_\_\_\_\_ Phone #: (\_\_\_\_) \_\_\_\_\_ e-mail: \_\_\_\_\_

Home address: \_\_\_\_\_ City: \_\_\_\_\_

Zip: \_\_\_\_\_ Phone #: (\_\_\_\_) \_\_\_\_\_ e-mail: \_\_\_\_\_

Name: \_\_\_\_\_ School: \_\_\_\_\_

School Address: \_\_\_\_\_ City: \_\_\_\_\_

Zip: \_\_\_\_\_ Phone #: (\_\_\_\_) \_\_\_\_\_ e-mail: \_\_\_\_\_

Home address: \_\_\_\_\_ City: \_\_\_\_\_

Zip: \_\_\_\_\_ Phone #: (\_\_\_\_) \_\_\_\_\_ e-mail: \_\_\_\_\_

Name: \_\_\_\_\_ School: \_\_\_\_\_

School Address: \_\_\_\_\_ City: \_\_\_\_\_

Zip: \_\_\_\_\_ Phone #: (\_\_\_\_) \_\_\_\_\_ e-mail: \_\_\_\_\_

Home address: \_\_\_\_\_ City: \_\_\_\_\_

Zip: \_\_\_\_\_ Phone #: (\_\_\_\_) \_\_\_\_\_ e-mail: \_\_\_\_\_