



2025 ABRC Conference
Individual Registration Form
 August 25-28, 2025
 Register by July 1, 2025

*Your ABRC membership covers program costs.
 Accommodation cost of \$300 covers meals from Monday
 supper to Thursday breakfast, socials and 3 nights.**

Name: _____

Retreat Center: _____

Email Address: _____

Your role at your Center: _____

Areas of interest for discussion groups: _____ Directors _____ Hospitality Staff
 _____ Administrative Assistants _____ Dietary _____ Communications, Marketing Staff
 _____ Program Staff/Presenters _____ Other: _____

(Registration for staff attending breakouts on Zoom will be organized later.)

Address: _____

• Office Phone: _____ Cell Phone: _____

• Accessibility needs: _____

• **Travel:**

I plan to arrive on Monday, 25st at approximately _____(time) by
 _____ car **or** _____ plane _____ flight # _____

(Someone will contact you about pick-up arrangement at Omaha Epply Airfield)

• I plan to leave Thursday a.m. (with pick-up breakfast) : _____ yes _____ no

***Do you need accommodations for earlier arrival or later departure than conference dates? **This will be additional cost.** Check what you will need and add it on to the conference fee of \$300. The costs below include tax and are for a single room.

Sunday overnight _____ \$56.42/night; Thursday overnight _____ \$56.42/night

Sunday breakfast: \$9.50 _____ lunch: \$14.03 _____ Dinner: \$12.98 _____

Monday breakfast: \$9.50 _____ lunch: \$14.03 _____

Thursday lunch: \$14.03 _____ Dinner: \$12.98 _____ Friday breakfast: \$9.50 _____

Pay as group or individually
Please mail registration and payment to:
Karen Ceckowski
37174 State Highway VV, PO Box 501
Conception, MO 64433

**NOTE: If this falls into the 25-26 fiscal year for you,
 please register now and send check BEFORE AUGUST 1.**