

NYSCOPBA
102 Hackett Boulevard
Albany, NY 12209
Registration Form
Executive Assembly Meeting
The Desmond
660 Albany Shaker Road Albany, NY 12211
(518) 869-8100
December 11 & 12, 2019

Name:

Address:

Telephone Number:

Sector:

**How Many Attending
From Sector**

(Besides Yourself):

Date of Arrival:

Date of Departure:

Smoking Preference:

PLEASE SUBMIT THIS FORM NO LATER THAN **November 22, 2019** IN ORDER FOR PROPER ARRANGEMENTS TO BE MADE. IF YOU ARE MAILING THIS FORM PLEASE SEND IT TO **ATTN: LISA SUOMINEN**

**** NOTE:** If you are requesting additional EOL time, include your work shift and date(s) needed. You **MUST** work an **afternoon** or **evening** shift and be at least **200** miles from Albany to be granted travel time.

DATE & SHIFT HOURS _____