2018 Land Records Modernization Conference

June 13, 2018 ◦ Crowne Plaza Columbus North ◦ Columbus, Ohio

Attendee Registration

Who Should Attend?
County engineers, commissioners, auditors, recorders, and tax map employees, as well as surveyors, property recorders, and anyone involved with land records.

Networking
Discuss hot topics with colleagues from around the state. Visit the displays of our corporate partners to learn about state of the art products and services.

Education
Latest updates, legal information, and best practices.
6.0 CPD hours in surveying are available.**

Tentative Schedule Overview*

June 13, 2018
Registration and Trade Show Opens......8:00am-8:45am
Sessions........................................8:45am-12:00pm
Lunch ........................................12:00pm-12:45pm
Sessions........................................12:45pm-1:45pm
Dessert Break in Exhibit Area ..........1:45pm-2:15pm
Sessions........................................2:15pm-4:15pm

*Please check CEAO.org for the most up-to-date schedule, speakers, and other important updates

**CPD certificates will be offered for each technical session for a maximum of 6.0 CPD hours in surveying. Please note that the final determination of what qualifies for CPD credit ultimately lies between the license holder and the State Board of Registration for Professional Engineers & Surveyors.

Crowne Plaza Columbus North
6500 Doubletree Avenue
Columbus, Ohio 43229
614-885-1885
www.cpcolumbusnorth.com
Hotel Group Rate: $115
Group Code: OHL
To receive our group rate, book by May 22, 2018

Please make checks payable to:

CEAO
6500 Busch Boulevard, Suite 100
Columbus, Ohio 43229
614-221-0707 ◦ info@ceao.org
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Attendee Registration: $169 per person through May 30th.
After May 30th rates increase to $219 per person.

Register online at CEAO.org or complete this form and email to info@ceao.org.

Name___________________________________________________________
Organization_____________________________________________________
Title___________________________________________________________P.E. □ P.S. □
Email___________________________________________________________
Phone_________________________________________________________
Address________________________________________________________
City ____________________________ State _______________ ZIP_______________

If you have a medical condition that requires a special meal or other reasonable accommodations, please describe below:
________________________________________________________________________
________________________________________________________________________

Cancellation Policy: 100% refund (less credit card processing fees if paid by credit card) before May 30, 2018;

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