

FLEX SPACE Portland, Oregon · · · 16-19 September 2015

CONFERENCE REGISTRATION PACKAGE

PROGRAM INCLUDES

Judging calibration / seminars / coffee judging / evening event Wed 16 Sep

Thu 17 Sep Seminars / coffee judging / evening event

Fri 18 Sep Seminars / coffee judging / finals / evening at Leisure

Sat 19 Sep Green Bean Zone / Afternoon at Leisure / Compak Golden Bean Awards Dinner

Sun 20 Sep Depart for home

COSTS

Full Delegate\$550.00 per person

Includes: Calibration Session

Coffee Judging All Seminars

Green Bean buying show

Evening events / networking functions

Golden Bean T-Shirt

One Day/Evening Rate.....\$200.00 per person or

Spouse All Evening Events.....\$300.00 per person One Evening Event.....\$100.00 per person or

Please send completed registration forms to

(page 2 and 3) Scan/email: kristine@cafeculture.com

> OR Mail: The Compak Golden Bean North America

> > 1028 SE Water Avenue,

Suite 275 Portland Oregon 97214





























THE WORLD'S LARGEST ROASTING COMPETITION

Full Delegate



CONFERENCE REGISTRATION PACKAGE

Business Name:	
First Name:Surname:	
Position:	
Address:	
Town:	
State:Zip code:	
Telephone:Fax:	
Cell Phone:	
Email:	
Do you have coffee grading/judging certifications $\ \square\ Y\ \ \square\ N$	
If so, please give details	
Please indicate (1, 2 & 3) your preferred judging category (1 = preferred)	Filter
T-Shirt Size: One t-shirt per full paying delegate - Please tick required size	
Men ☐ XS ☐ S ☐ M ☐ L ☐ XL ☐ XXL ☐ XXXL Ladies ☐ 8 ☐ 10 ☐ 12 ☐	14 🗌 16
**** If you would like to purchase additional t-shirts for other staff or spouses please ema requirements to kristine@cafeculture.com	il your
Spouse	
First Name:Surname:	
Special Dietary Requirements	
Please send completed registration forms to (page 2 and 3) Scan/email: kristine@cafeculture.com OR Mail: The Compak Golden Bean North America	
1028 SE Water Avenue, Suite 275 Portland Oregon 97214	





























ROASTING COMPETITION



CONFERENCE REGISTRATION PACKAGE PAYMENT ADVICE

DELEGATE	DELEGATE \$550.	00 X	(no. of delegates)	= \$
	One Day/Evening			
	Please tick date/s	of attendance	e Wed Thurs Fri 16th 17th 18th	
	\$200.00 x	_ (no. of days) :	X (no. of delegates)	= \$
	AWARDS NIGHT	ONLY (19th)) \$100.00 × (no. of	delegates) = \$
SPOUSE (eve	ening events only)			
	All Evening Event	ts \$300.00 x	X (no. of delegates)	= \$
	One Evening			
	Please tick evening	y/s of attenda	ance Wed Thurs Sa	at (awards night) bth
	\$100.00 x	_ (no. of evening	gs)	= \$
			TOTAL AMOUNT	DUE =\$
			TOTAL AMOUNT	DUE =\$
Please debit	my □ Mastercard	d □Visa		DUE =\$
Please debit	my ☐ Mastercard	d □Visa		DUE =\$
Please debit	•			
Please debit	For the amount of	\$	☐ Amex	
Please debit	For the amount of Card Number:	\$	☐ Amex	
Please debit	For the amount of Card Number: Card Expiry Date:	\$	Amex	
Please debit	For the amount of Card Number: Card Expiry Date: Cardholders Name	\$	Amex	CCV#:
	For the amount of Card Number: Card Expiry Date: Cardholders Name Cardholders Signa	\$ e:	Amex	CCV#:
Please send	For the amount of Card Number: Card Expiry Date: Cardholders Name Cardholders Signa completed registrat	\$e: ature:tion forms to	Amex Amex kristine@cafeculture.com	CCV#:
Please send	For the amount of Card Number: Card Expiry Date: Cardholders Name Cardholders Signa completed registrat	\$e:tion forms to	Amex Amex kristine@cafeculture.com	CCV#:



























