

# Symposium Registration Form

*Carder Steuben Glass Association September 19-20, 2025*

Attendee 1 First Name

Attendee 2 First Name

Attendee 1 Last Name

Attendee 2 Last Name

Attendee 1 Badge Name (if different from above)

Attendee 2 Badge Name (if different from above)

Attendee 1 Email

Attendee 2 Email

Attendee 1 Phone

Attendee 2 Phone

Attendee 1 Address

Attendee 2 Address

Attendee 1 Address 2 (Optional)

Attendee 2 Address 2 (Optional)

City

City

State

Zip

State

Zip

Attendee 1 Registration Fee

Attendee 2 Registration Fee

(includes 2 breakfasts, 2 lunches, reception,  
banquet, and programs)

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☐ \$285 – CSGA Member Registration (by 9/8/25)

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☐ \$250 – CSGA Member First Time Attendee

☐ \$250 – CSGA Member First Time Attendee

☐ \$315 – Non-Member Attendee

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Attendee 1 Saturday Banquet

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☐ Buffet - A Night in Italy

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☐ I would like to invite a guest (for Saturday Banquet Only) - \$90.00

Guest First Name

Guest Last Name

Guest Saturday Banquet

☐ Buffet - A Night in Italy

Total Due \_\_\_\_\_

Mail this form and payment to:  
Bonnie Salzman  
Carder Steuben Glass Association  
5501 Eagle Point Drive  
Geneseo, NY 14454

*Make checks payable to Carder Steuben Glass Association*