

# Management Education – Level 1 Registration Form

**DO NOT book travel reservations until you receive confirmation on the conference.**

The conference costs reflect the conference fees only. You will be responsible for all hotel accommodations, transportation, entertainment, meals, etc. Attire for the conference is business casual. We will take an hour break each day for lunch and you will need transportation to one of the many local restaurants for your lunch break.

## Area Hotels:

### Radisson Suites Hotel

Address: 11520 West Bernardo Court  
San Diego, CA 92127

Telephone: (858) 451-6600  
(Mention Pacific Solutions' Corporate Rate)  
[www.radisson.com](http://www.radisson.com)

### Holiday Inn Rancho Bernardo

Address: 17065 West Bernardo Drive  
San Diego, CA 92127

Telephone: (858) 485-6530  
[www.holidayinn.com](http://www.holidayinn.com)

### Hilton Garden Inn Rancho Bernardo

Address: 17240 Bernardo Center Drive  
San Diego, CA 92127

Telephone: (858) 676-1660  
[www.hilton.com](http://www.hilton.com)

## Directions:

### From San Diego International Airport:

Take **I-5 North** (Interstate 5) stay right to **I-8 East** (Interstate 8).

Take the exit for CA Highway **163 North**. Stay on **163 North** to merge onto **I-15 North** (Interstate 15).

Proceed on **I-15 North** exit **Rancho Bernardo Road**. Turn left at the bottom of the exit at the light.

Turn left on **Via Tazon** (3<sup>rd</sup> light). Make the **first right** into our parking lot. **Pacific Solutions** will be straight ahead in the left building.

Complete this portion & scan back to Pacific Solutions at: [training@pacific-solutions.com](mailto:training@pacific-solutions.com) or fax to: 858-675-9377

**\*\*All conference registration forms must be completed, paid and submitted to Pacific Solutions a minimum of 21 days prior to the conference event. All conferences are subject to cancellation within 30 days of the conference event. Please DO NOT book or finalize travel plans until you have received confirmation from Pacific Solutions.**

_____ Company Name	_____ Emergency Phone#	_____ Dates attending Conference
_____ Attendee Name	_____ Email Address	Total # of Guests: _____ x\$800 Each
_____ Attendee Name	_____ Email Address	Subtotal Fees: \$ _____
_____ Attendee Name	_____ Email Address	Less Discount(s): \$ _____
_____ Attendee Name	_____ Email Address	Total Fees: \$ _____
_____ Attendee Name	_____ Email Address	
_____ Credit Card Number	_____ Exp. Date	_____ Authorized Signature

