

NOTE: CONFERENCE DATE CHANGE

COBA 45th Annual Black Child Conference and Scholarship Luncheon

*****SATURDAY, APRIL 18, 2020*** – 7:00 am – 3:00 pm**

7:00 am – 12:00 pm –Registration, AM Session, Workshops / 12:30 pm – 3:00 pm – Scholarship Luncheon

Theme: “Fostering the Brilliance of the Black Child”

Sheraton Gateway LAX Hotel – 6101 W. Century Boulevard – Los Angeles, CA 90045

Registration Form and Registrants’ List

Due: On or Before Friday, February 28, 2020 - \$195 Per Participant

I. P-Card - On-line Registration: www.cobalausd.net

- a. Please Email Registrants’ List to: cobabcc@gmail.com
- b. Please Print confirmation receipt after transaction

II. School Purchase Order – COBA VENDOR CODE: 1-0000-10541

III. Instructions for School/Office Registration (Imprest Checks) See Current Reference Guide

- a. Check for sufficient funds for conference attendance with the School Administrative Assistant (SAA) or Fiscal Specialist.
- b. **PARENTS:** Refer to “Parent Conference Attendance” BUL-6748.1, dated 8/30/18
For parents - Do not need Form 10.12.1 dated 6-30-19
LAUSD EMPLOYEES (with Employee Numbers): Refer to “Request for Conference, Convention or Meeting Attendance” (Revised Form 10.12.1 dated 6-30-19) - Fillable on LAUSD Website and **submit** for Approval to the Principal and Local District Administrator per each attendee. Attach flier with date, name of event and amount per participant. *Also, refer to: (BUL-5525.3, District Policy for Travel & Attendance at Conferences or Conventions, dated 11/14/18*
- c. Complete the following information:

Fund:	Area:	Location Code:	Program Code:	Object/Subject

Approved by: _____

School Administrator (*Print Name*)

Signature

Date

MAIL a copy of this form, the approved Form 10.12.1 and Imprest Check # _____ to:

COBA – P. O. Box 561584 – Los Angeles, CA 90056. ATTN: COBA CONFERENCE

Contact Information

School/Office _____ Local District _____

Contact Person _____ Title _____

Telephone Number _____ Extension _____ Fax _____

Email _____

Registration Information (Complete Registrants’ List on reverse side of this page)

Number of Registrants:	_____ Parents	_____ Staff	_____ Total Number of People
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Conference Registration Fee and Registrants’ List-DUE no later than Friday, February 28, 2020

CONFERENCE FEE: \$195 Per Participant

Conference Fee Includes: Complimentary Self-Parking, Continental Breakfast, Workshops, Scholarship Luncheon and Souvenirs in a COBA Tote Bag

Participants will have an opportunity to purchase items from Conference Vendors

LUNCHEON ONLY FEE: \$ 95 per participant - includes Lunch and Complimentary Self Parking

