

The conference fee is \$150.00 per person, due before June 5 (after June 5 the fee is \$175.00).

**Fee includes:**

- ★ Bereavement Workshop, Friday
- ★ Welcome Reception, Friday evening
- ★ Continental Breakfast, Saturday & Sunday
- ★ Lunch, Saturday & Sunday
- ★ Saturday Evening Banquet
- ★ Two Coffee breaks per day, Saturday & Sunday
- ★ All Conference Sessions
- ★ Information Packet and Materials

**YOU WILL RECEIVE REGISTRATION CONFIRMATION BY EMAIL FROM THE CJD FOUNDATION.\***

\*Refunds are available, less \$25 processing fee, for cancellation requests made by June 15, 2009. No refunds after this date.

All refunds will be processed after the conference.

## Washington Court Hotel

**Hotel reservations must be made directly with the Washington Court Hotel.**

### SPECIAL RATES

\$169.00 Per standard room per night  
\$179.00 Per double room per night

Call (800) 321-3010 or (202) 628-2100 and ask for reservations.

Reference the CJD Foundation for this rate. Space is limited!

## Sponsorship Opportunities

- ★ Wine Reception - \$1,000
- ★ Saturday Breakfast - \$2,000
- ★ Four Coffee Breaks - \$500 each
- ★ Saturday Lunch - \$3,000
- ★ Saturday Dinner - \$5,000
- ★ Sunday Breakfast - \$2,000
- ★ Sunday Lunch - \$3,000

Opportunities are available to any family member, individual or group. Sponsor names will appear on signage at the conference and on the binder.

If you are interested or need more information, please contact **Marisa** at (800) 659-1991 or [help@cjd.foundation.org](mailto:help@cjd.foundation.org).



Creutzfeldt-Jakob Disease  
Foundation, Inc.

**The CJD Foundation, Inc.**  
**P.O. Box 5312, Akron, Ohio 44334**  
**330.665.5590**  
**330.668.2474 FAX**

**HelpLine 1.800.659.1991**  
**[www.cjdfoundation.org](http://www.cjdfoundation.org)**  
**[help@cjdfoundation.org](mailto:help@cjdfoundation.org)**

# CJD 2009 and the CJD Foundation Family Conference

*July 10-13, 2009*



Creutzfeldt-Jakob Disease  
Foundation, Inc.

**CJD Surveillance**  
National Prion Disease  
Pathology Surveillance Center

 **PrioNet Canada**

## Speakers

- ★ Pierluigi Gambetti, M.D.
- ★ Neil Cashman, M.D., FRCP(C)
- ★ Adriano Aguzzi, M.D., Ph.D.
- ★ Alberto Bizzi, M.D.
- ★ Michael Geschwind, M.D., Ph.D.
- ★ Gerard Jansen, M.D.
- ★ Richard Knight, M.D. FRCP(E)
- ★ Steven Korzeniewski, MSc, MA
- ★ Ryan Maddox, MPH
- ★ Mauricio Pocchiari, M.D.
- ★ Martine Rosset, Ph.D.
- ★ Jiri Safar, M.D.
- ★ Victor Sanchez, M.D., Ph.D.
- ★ Claudio Soto, Ph.D.
- ★ Fabrizio Tagliavini, M.D.
- ★ Robert Will, M.D.
- ★ Wen-Quan Zou, M.D., Ph.D.

## Family Support Organizations

- ★ CJD Foundation, US
- ★ CJD Insight - familial CJD support, US
- ★ CJD Support Group Network, Australia
- ★ CJD Alliance, UK
- ★ CJD Support Network, UK
- ★ CJD Support Network, Japan
- ★ Associazione Italiana Encefalopatie da Prioni (A.I.En.P.), Italy
- ★ CJD Foundation, Mexico

The full schedule will be posted on our website soon.

[www.cjdfoundation.org](http://www.cjdfoundation.org)

## NEW: Bereavement Workshop

Friday, July 10 at 4 p.m.

Facilitated by: Katrina Hallmark, PhD,  
Deana Simpson, RN & Marisa Boarman, BS

## REGISTRATION FORM

Please return this completed form via mail to  
CJD Foundation, PO Box 5312, Akron, OH 44334  
or FAX to 330.668.2474.

\_\_\_\_\_  
Name/Names

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City/State/Zip

(\_\_\_\_\_) \_\_\_\_\_  
Telephone

\_\_\_\_\_  
Email

**I will participate in the Advocacy Training and Capitol Hill Visits:** Yes  No   
**Please check yes or no.**

Please supply your approximate departure date and time so we can work around your schedule.

Date of Departure: \_\_\_\_\_

Time of Departure: \_\_\_\_\_

*If you are participating in Capitol Hill Visits, please plan to stay most of the day on Monday, July 13.*

## Voluntary Information

I am attending to honor my:

\_\_\_\_\_  
Relationship

\_\_\_\_\_  
Name

*If you would like to bring a photo, we will post it during the conference.*

## I will attend the following:

**Please check yes or no for each one.**

Friday Bereavement Workshop	Yes <input type="checkbox"/> No <input type="checkbox"/>
Friday Evening Reception	Yes <input type="checkbox"/> No <input type="checkbox"/>
Saturday Continental Breakfast	Yes <input type="checkbox"/> No <input type="checkbox"/>
Saturday Lunch	Yes <input type="checkbox"/> No <input type="checkbox"/>
Saturday Evening Banquet	Yes <input type="checkbox"/> No <input type="checkbox"/>
Sunday Continental Breakfast	Yes <input type="checkbox"/> No <input type="checkbox"/>
Sunday Lunch	Yes <input type="checkbox"/> No <input type="checkbox"/>
Vegetarian Meals ( <i>meaning no fish or chicken</i> )	Yes <input type="checkbox"/> No <input type="checkbox"/>

\_\_\_ Registrations x \$150 each = \$ \_\_\_\_\_

\_\_\_ Sponsorship x \$ \_\_\_\_\_ = \$ \_\_\_\_\_  
(sponsorship details on back)

I am unable to attend but would like to support the family conference in the amount of:

\_\_\_ Donation = \$ \_\_\_\_\_

\_\_\_\_\_  
Visa/MC #

\_\_\_\_\_  
Expiration Date

\_\_\_\_\_  
Billing Zip/Postal Code

\_\_\_\_\_  
Signature

**CONFERENCE FEE MUST BE PAID WITH REGISTRATION. PLEASE CONTACT US WITH ANY QUESTIONS.**

**(800) 659-1991 or  
help@cjdfoundation.org**

**Visa and MasterCard accepted.**

You can register one of three ways:  
(a completed registration form is needed regardless of payment method):

1. By mail with check, money order or charge information (make checks payable to CJD Foundation)
2. By Fax (330) 668-2474 with charge information
3. By phone (800) 659-1991 with charge information