

25th Idaho Rare Plant Conference
Idaho Native Plant Society, Boise, Idaho
October 19-20, 2011

2011 RPC SCHEDULE

October 18: *Kick-off Social.* 6:30 - 8:30 pm. The Reef, 6th & Main, Hemingway Room.
No host drinks, appetizers, dinner.

October 19: *Rank Calculator Demonstration & Rare Plant Assessments.* 7:45 am - 5:00 pm.
Idaho State BLM Office, 1387 S. Vinnell Way, Sagebrush Room.
Statewide session in the morning, regional break-out sessions in the afternoon.

Potluck Dinner. MK Nature Center, 600 S. Walnut.

October 20: *Field Trip: Rare Plant Monitoring & Conservation Efforts in Boise Foothills.* Details TBA.
Led by Boise botanist Michael Mancuso.

For additional conference information, please visit our website: www.idahonativeplants.org

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2011 RPC REGISTRATION FORM

Name: _____

Organization: _____

Address: _____

City: _____ State: _____ Zip code: _____

Telephone: _____ E-mail: _____

Registration Fees – No fees this year, but we still need an accurate count of participants for planning and preparation of conference materials. Please return this form via email or snail-mail *as soon as possible*.

Total number attending (indicate co-attendees on the next page): No.: _____

Wednesday Sack Lunch (optional) – An optional sack lunch will be available for purchase *at the conference* for \$8.50. Jenny's Lunch Line is catering the meal and it will consist of generous half sandwich, side salad, and cookie. (Exact menu changes daily.) Please indicate your choice of regular or vegetarian lunch below:

Regular Lunch Qty: _____

Vegetarian Lunch Qty: _____

Conference T-shirt (optional) – RPC T-shirts will be available for purchase *at the conference* for \$10.00. In order to ensure we'll have your size available, please indicate quantity and size(s) below:

2011 RPC T-shirt Qty: _____ Size (2XL, XL, L, M, S): _____

Please email this form to INPS.treasurer@gmail.com or mail to:

INPS Rare Plant Conference, P.O. Box 9451, Boise, ID 83707

Additional attendees:

Name: _____

Organization: _____

Address: _____

City: _____ State: _____ Zip code: _____

Telephone: _____ E-mail: _____

Lunch Choice: Regular Vegetarian

Name: _____

Organization: _____

Address: _____

City: _____ State: _____ Zip code: _____

Telephone: _____ E-mail: _____

Lunch Choice: Regular Vegetarian

Name: _____

Organization: _____

Address: _____

City: _____ State: _____ Zip code: _____

Telephone: _____ E-mail: _____

Lunch Choice: Regular Vegetarian

Name: _____

Organization: _____

Address: _____

City: _____ State: _____ Zip code: _____

Telephone: _____ E-mail: _____

Lunch Choice: Regular Vegetarian