

WELCOME TO AFRAD 2009

Training & Community Center (TACC)  
Camp Ripley – Little Falls, MN

### TENTATIVE AGENDA

SATURDAY, 29 AUGUST 2009

0800—1600 Exhibitors (Cafeteria)

#### **MORNING SESSION** (Limited to 204)

0700-0800 Sign-in	Lobby
0800-0930 Briefings	Theater
0930-1000 Refreshment Break	Cafe
1000-1130 Briefings	Theater
1130-1215 Lunch	Gym

#### **AFTERNOON SESSION** (Limited to 204)

1030-1200 Sign-in	Lobby
1100-1145 Lunch	Gym
1200-1330 Briefings	Theater
1330-1400 Refreshment Break	Café
1400-1530 Briefings	Theater
1600 Chapter 115 meeting	Café

The **deadline** for registration with meals is 17 August because of contractual obligations.

Walk-ins are welcome, but meals are unavailable.

### CONCURRENT ACTIVITIES

ID CARD PROCESSING (in TACC)  
Based on first come – first served.  
Friday & Saturday, 0830 to 1530

Military Museum  
Friday, 1000 to 1700  
Saturday, 1000 to 1600

Post Exchange & Class VI Store  
Friday, 1000 to 2000  
Saturday, 1000 to 1600

### LODGING

On-Post housing **may be** available by calling 320-632-7378 for reservations.  
Check in at Building #6-76 Ed Center  
Friday, 0600 to 2400  
Saturday, 0700 to 2300

AmericInn of Little Falls, MN  
306 LeMieur St SE 320-632-1964  
Reservations: 888-205-0958

Country Suites By Carlson Little Falls  
209 16th Street, NE 320-632-1000  
Reservations: 800-596-2375  
E-mail: [cx\\_lfal@countryinns.com](mailto:cx_lfal@countryinns.com)

AFRAD Point of Contact:  
Ralph Donais  
Phone: 763-441-2630  
E-mail: [r.l.donais@izoom.net](mailto:r.l.donais@izoom.net)

### REGISTRATION FORM

8th Annual Camp Ripley AFRAD  
Training & Community Center (TACC)  
Saturday, 29 August 2009

Yes, I wish to attend (select 1 session)  
 0800 Morning Session  
 1200 Afternoon Session

\_\_\_ # person/s @ \$7.50 Registration

\_\_\_ # person/s @ \$7.50 Lunch

\$\_\_\_\_\_ Total amount enclosed  
Check payable to "TREA Chapter 115"

\_\_\_\_\_  
First & Last Name

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

\_\_\_\_\_  
City, State & Zip Code

\_\_\_\_\_  
Home Telephone with area code

\_\_\_\_\_  
E-mail address

\_\_\_\_\_  
Military Service & Retired Rank

\_\_\_\_\_  
Guest (first & last name)

Mail registration form & check to:  
TREA Chapter 115  
906 Lookout Place, Elk River, MN 55330

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CUT ALONG LINE AND MAIL-----