MATION SHARING CONFERENCE

17th Annual Homicide Conference

October 12-15, 2008 in Chattanooga,

Training Topics

- -Amish School Shooting
- -DNA & Forensic Techniques
- -Cold Case Investigations
- -No Body Homicides
- -State Intelligence Meetings
 Tentative topics-Subject to change



Conference Fee

Conference fee is \$100 per attendee for ROCIC RISS Members and law enforcement agencies from Tennessee. Fee includes all ROCIC Training Sessions and Information Exchange. An additional late registration fee of \$50 will be charged after September 29, 2008. Registration and payment required prior to the conference.

Pre-Registration and Payment

Make checks for registration fee payable to: "ROCIC". Credit cards are also accepted for an additional charge.

Forward payment with registration form to: **ROCIC Training** 545 Marriott Drive, Suite 850 Nashville, TN 37214 Or FAX to (615) 234-5432 - TAX ID # 62-1046640

> **Hosted By: Hamilton County Sheriff's Office** District Attorney's Office 11th JD **Chattanooga Police Department ROCIC**

USE ONLY: Received By:

Conference Schedule

Onsite Registration Sun. Oct. 12 3-5 pm **Onsite Registration** Mon. Oct. 13 7-8:45 am 9-5 pm **Opening Ceremony**,

State Intelligence & **Training Sessions**

Oct. 14 9-5 pm Tues. Oct. 15 9-12 noon Training Sessions Wed.

Training Sessions

Hotel Accommodations

A block of rooms is available for \$85 for reservations made by September 18, 2008. Attendees responsible for lodging, meals and travel.

All conference activities will take place at the Chattanooga Convention Center



Marriott Chattanooga 2 Carter Plaza Chattanooga, TN 37402 (423) 756-0002 Ref. "ROCIC"



For More Information

For more information contact the ROCIC Training Department at 1.800.238.7985 ext. 535; email to training@rocic.riss.net; or visit the ROCIC secure Homepage (http://rocic.riss.net) and click on "Training Announcements.





Date:





Registration Form

ROCIC Fall 2008 Training and Information Sharing Conference "17th Annual Homicide Conference" - Chattanooga, TN - October 12-15, 2008

Please print (legibly) or type your name as you want it to appear on your certificate.			
ROCIC Agency #:	Agency Nam	ne:	
Name:		Email Address:	
Mailing Address:			
City: S	State: Zip:	Telephone & Fax: _	
FOR ROCIC Date Received	:	Check Amount:	Check #:

Entered By: