

# 31st Annual Athletic Directors Conference

Thursday and Friday, March 26, 27, 2015 / Sheraton Hartford South (Formerly -Rocky Hill Marriott)  
EARLY BIRD SCHEDULE

## Thursday, March 26, 2014

7:30 – 9:00 a.m. **Donut Derby – Gift Redemption**  
 9:00 -11:00 a.m. **CIAC Workshop – Steve Wysowski**  
 12:00 - 1:15 p.m. **Luncheon / CAAD General Meeting**  
**President**  
*Dan Scavone*  
 2:00 - 3:00 p.m. **General Session-**  
**Billy “White Shoes” Johnson**  
 3:15 - 4:15 p.m. **Workshop Sessions**  
 5:00 - 6:00 p.m. **Social Hour**  
 6:00 - 9:00 p.m. **Awards Banquet**

## 2014 C.A.A.D. AWARD RECIPIENTS

**“Distinguished Service - Athletic Administration”**  
 Betty Remigino-Knapp, West Hartford Schools

**“NIAAA State Award of Merit”**  
 Chris Manfredonia, Darien High School

**“Duncanson Meritorious Service Award”**  
 Mark Snyder, Prince Technical School

**“Past President Award”**  
 Brian Fell, Woodland High School

## Friday, March 27, 2014

8:00 - 9:30 a.m. **CAAD Annual Breakfast – Rod Dixon, Olympic Medalist**  
 10:00 -11:00 a.m. **CAAD Coaching Education Modules**  
 By CAAD State Faculty  
 11:15 -1:45 p.m. **Buffet Luncheon and**  
**CAAD Closing Meeting**

CEU'S WILL BE AWARDED EACH DAY

### PRE-REGISTRATION INFORMATION

#### Early Bird Conference Registration

Name \_\_\_\_\_  
 School \_\_\_\_\_  
 Town \_\_\_\_\_ Zip Code \_\_\_\_\_  
 Telephone ( ) \_\_\_\_\_

Payment enclosed is to cover:

Registration: CAAD Member -- \$100.00 \_\_\_\_\_  
 Non-member -- \$255.00 \_\_\_\_\_

Total Enclosed -- \$ \_\_\_\_\_

Squad Locker Gift Size Request (circle one)

Mens - S M L XL 2XL 3XL

Womens – S M L XL 2XL 3XL

Make checks payable to: CAAD  
 Return to: Judy Sylvester  
 30 Realty Drive  
 Cheshire, CT 06410

or Register Online at: [caadinc.org/conference.html](http://caadinc.org/conference.html)

No one-day fees \* No refunds after March 14, 2015  
Conference gift not guaranteed after March 7.

#### Hotel Registration

#### Group- Connecticut Association of Athletic Directors

Name \_\_\_\_\_  
 Mailing Address \_\_\_\_\_  
 Telephone ( ) \_\_\_\_\_

Arrival Date: \_\_\_\_\_  
 Departure Date: \_\_\_\_\_

Credit Card # \_\_\_\_\_  
 \_\_\_ VISA \_\_\_ MC \_\_\_ American Express  
 Expiration Date \_\_\_\_\_

Check one:  2 Double Beds  King Bed

\$109.00 per night Plus 15% tax

Send this form along with check or credit card # to:

Hartford Sheraton South  
 100 Capital Boulevard  
 Rocky Hill, CT 06067  
 Attn. Katie Gonzalez

or Register Online at: [caadinc.org/conference.html](http://caadinc.org/conference.html)

Room Rate NOT guaranteed after March 14, 2015