

U. S. COAST GUARD AUXILIARY DIVISION IX CHANGE OF WATCH

January 27, 2007

Radisson Research Triangle Park
150 Park Drive, Durham, NC
Tel 919-549-8631

The Division IX Change of Watch will be held on 27 January 2007, at the Radisson Research Triangle Park (formerly the Governor's Inn). The Radisson is located at the intersection of I-40 (exit 280) and Davis Drive at 150 Park Drive. Call 919-549-8631 to reserve a room. Call on or before 12 January 2007 and identify yourself as an Auxiliarist to receive the special rate of \$89.00 per night.

The COW program will include a mandatory Operations Seminar: please note that the OPS seminar is required for all members serving as Coxswains or Crew Members. Other seminars offered will be Information Systems (IS), Vessel Safety Check (VSC), Blood Borne Pathogens and Sexual Harassment.

The COW Awards Banquet will begin at 1900. Registration and dinner cost is \$35.00 per person. There will be a cash bar at the Banquet.

PROGRAM

Morning Activities		Afternoon Activities	
0900-0945	Registration	1145-1300	Lunch
0945-1000	DCP (e) Welcome	1230-1300	Photos and New Member Fingerprinting
1000-1045	Information Systems (IS)	1300-1330	Blood borne Pathogens
1000-1400	Ladies Lunch/Shopping excursion	1330-1400	Sexual Harassment
1045-1100	Break	1400-1415	Break
1100-1145	Vessel Safety Check	1415-1615	Operations
Evening Activities			
1800-1830	Flotilla Commanders Social (DCP Suite - Outgoing and Incoming FC's)		
1800-1900	Social (Cash Bar)		
1900-	Change of Watch Banquet - (Captain's Party afterwards)		

UNIFORM OF THE DAY

Morning and Afternoon Activities	Tropical Blue Long or Appropriate Civilian Attire (for Members that do not have the Uniform)
Evening Activities	Dinner Dress Blue Jacket, Dinner Dress Blue or Appropriate Civilian Attire

PLEASE NOTE THAT THE BANQUET REGISTRATION DEADLINE IS JANUARY 20, 2007.

Reservation Form for Change of Watch

Please detach and mail to: **Tom Clark**
2826 Bedford Street
Burlington, NC 27215
Email: tomclark@netpath.net **Phone: (336) 584-5767**

Name: _____ **Prime Rib** _____
Address: _____ **Grilled Salmon** _____
City, State, ZIP: _____ **Vegetarian** _____

Additional Registration for:
Name: _____ **Prime Rib** _____
Grilled Salmon _____
Vegetarian _____

AMOUNT ENCLOSED _____

Please enclose check payable to **USCGAUX Division IX** in the amount of \$35.00 for each person