

2008 DIVISION LEADERSHIP CONFERENCE

January 25-27

The Fairmont Washington DC Hotel and Resort
2401 M Street Norwest, Washington D.C. 20037
Phone: (+1/202) 429-2400

Please complete all portions of this form and return in Division Services **no later than Friday, November 9th** to secure hotel accommodations.

CONFERENCE REGISTRATION

Name: _____ Name for Badge: _____
First M. Last

Division Name: _____ Division #: _____

Division Title: _____

Institution: _____ Department: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____

*Email: _____ (*Required for confirmations)

HOTEL REGISTRATION

Arrival Date/Time: _____ Departure Date: _____

I would like to request a hotel room for:

1 person - \$179 2 persons /2 beds - \$179

ADA-Accessible Room – please specify needs I will **NOT** need a hotel room

Non-Smoking Smoking

If sharing a room with another DLC participant(s), please list here:

CREDIT CARD INFORMATION:

American Express Discover MasterCard VISA

Cardholder Name: _____

Card Number: _____ Expiration Date: _____

Please indicate any special diets or dietary restrictions: _____