

Complete this form and fax to the Association Office at **817-488-4804**. 1A will manage a master rooming list so there is no need for you to contact the Gaylord directly to make your room reservation.

*****THE DEADLINE FOR ANNUAL MEETING REGISTRATION
IS FRIDAY, AUGUST 29, 2008*****

Each University representative should submit a separate registration form. Appropriate credit card information must accompany all registration forms when submitted in order to hold reservations.

Name: _____ **Institution:** _____

Address: _____

_____ (City) _____ (State) _____ (Zip)

Telephone: _____ **Fax:** _____ **Email:** _____

Title:

Athletic Director _____ Senior Associate _____ CHAMPS Administrator _____
FAR _____ Conference Office Representative _____ Other _____

I will attend the Annual Meeting. _____ **I will not attend this year.** _____

I will need lodging reservations for the following dates: *(check the dates needed)*

_____ Sunday, Sept 28 _____ No accommodations needed
_____ Monday, Sept 29 _____ *(Day Rate Applies)*

Annual Meeting attendees who do not need Gaylord accommodations will have a day rate of \$75.00 per day.

My room preference is: **Single** **Double** **Smoking** **Non-Smoking**

Credit card # _____ **Expiration Date** _____

Type of Card _____ **Signature** _____

FOR ATHLETIC DIRECTORS:

_____ **Yes, an Associate Athletic Director will accompany me. If so, please complete a separate registration form and return as instructed above.**

_____ **No, an Associate Athletic Director will not accompany me.**