XI STATE CONVENTION REGISTRATION

June 4-6, 2009 -- The University of the South -- Sewanee,TN

(To improve satisfaction, please mail roommates' registration forms in same envelope, and mail early!)

PLEASE PRINT CLEARLY

Last Name **First Name (will be badge name)**

Address

City, State, Zip

Phone Number **E-Mail Address (print plainly)**

Chapter Name **Area** **Year initiated**

Registration -- Total Convention Package

Price includes registration fee, all meals, linens, and two nights lodging in air-conditioned dormitories.

____ postmarked before May 1 .....$220.00

____ postmarked after May 1 .....$245.00

If You Do Not Sign up for the Convention Package above, complete the following:

Registration -- Non-Convention Package

_____ Registration fee postmarked on or before May 1st $50.00
_____ Registration fee postmarked after May 1st $70.00

June 4

_____ Thursday Dinner Buffet $25.00
_____ Thursday Night reception ..... $ 7.00

June 5

_____ Breakfast Buffet $16.00
_____ Awards Luncheon $23.00
_____ Presidents Banquet/Reception $39.00

June 6

_____ Birthday Brunch $18.00

Dormitory Reservations -- filled by postmark date:

_____ Thursday Night (June 4) only $47.00
_____ Friday Night (June 5) only $47.00
_____ Both Nights (June 4 & 5) $89.00

_____ 2008-2009 Initiate ..... subtract $5.00
_____ Xi State Past President ..... subtract $25.00

Total Amount Enclosed .....$_____

Only refunds requested in writing before May 15, 2009 will be honored. The registration fee cannot be refunded.

Convention Emergency Phone Numbers: **931-598-1250**
931-598-1111

Lost key replacement fee assessed by the University will be $100.00 per set and $25.00 per keycard.

Please Check All That Apply:

____ **2008-2009 Initiate**
____ **First State Convention**
____ **2008-2010 Chapter President**
____ **2007-2009 State Committee Chairman**
____ **2007-2009 Xi State Officer/Related Personnel**
____ **Past Xi State President**
____ **Xi State Achievement Award Honoree**
____ **50 Year Member (Year Initiated _____)**
____ **Vision Foundation Member**

____ I will serve as a page for one event at the convention.
____ I will serve as a table hostess.
____ I will sing in the Convention Chorus
____ I do NOT give permission for my picture or name to appear on the **Xi State website** or in the ***Xi State News.***

Dorm Preference & Dietary Needs

Dorms will be assigned on a first-come, first-served basis. Requests will be honored if at all possible.

Check below any that apply.

Dorm preference:(1st choice=1, 2nd choice= 2, 3rd choice= 3)

____ Humphrey's Dorm
____ Quintard Dorm
____ St. Luke's Dorm

Room preference:

____ Prefer single room (limited availability)
____ Prefer double room
Name of Roommate
_____
____ Handicapped room
____ Ground floor room

Special dietary needs:

____ Vegetarian
____ Diabetic
____ Other (Please specify)

Make checks payable to XI STATE CONVENTION.

Send this completed form and check to
Beverly Smith
5014 Hunter Trail
Chattanooga, TN 37415-1808

423-877-2874

bevsmith88@hotmail.com
bevsmith_ghs@yahoo.com