**Virginia State Association of Parliamentarians**

**61st Annual Convention**

Page 4

**Newport News Marriott at City Center**

**Newport News, Virginia 23606**

**May 5 -6, 2018**

**REGISTRATION FORM**

**Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_State:\_\_\_\_\_\_\_\_\_\_Zip:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Home Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Cell Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Vegetarian? \_\_\_\_\_\_\_ Special Dietary: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Name of Unit or Club: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_MAL\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**State Officer: \_\_\_\_\_\_Past President: \_\_\_\_\_Standing Committee Chair: \_\_\_\_\_Appointed Officer: \_\_\_\_\_**

 **Delegate from your Unit? Yes \_\_\_\_\_\_No \_\_\_\_\_\_ Delegate Form submitted: Yes \_\_\_\_\_\_\_No\_\_\_\_\_\_\_\_**

**Type of Membership: \_\_\_\_\_\_\_\_Primary \_\_\_\_\_\_\_\_ Affiliate \_\_\_\_\_\_\_\_MAL \_\_\_\_\_\_\_\_Student\_\_\_\_\_\_\_\_\_**

**Please list name as it should appear on the Convention Badge\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Health Conditions: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Emergency Contact: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Home Phone: \_\_\_\_\_\_\_\_Cell Number: \_\_\_\_\_\_\_\_\_**

**REGISTRATION FEE: The Registration Fee which includes cost of program, refreshments, Saturday’s lunch, Saturday’s banquet and Sunday’s breakfast and workshop materials is $150.00. The Registration Fee without any meals except the banquet is $100.00.**

**REGISTRATION FORM: Please return this form and payment (payable to VSAP) by April 6, 2018 to Cynthia Mayo, 6106 Phelps Street, Glen Allen, VA 23060. Telephone number: 804 262-0381.**

**LODGING: Please make your hotel reservation directly with the Newport News Marriott at City Center, Virginia, 23606 at the rate of $115.00 per night, plus taxes for Single or Double. Call** [**1-757-873-9299**](http://www.marriott.com/hotels/travel/ricmw-richmond-marriott-short-pump/). **CUTOFF Date for rate: APRIL 1, 2018.**

**Itemized Items Amount Submitted**

**Complete Registration (all inclusive) $ 150.00 \_\_\_\_\_\_\_\_\_\_\_**

**Registration without meals except banquet $100.00 \_\_\_\_\_\_\_\_\_\_\_**

**Sunday Breakfast $22.00 \_\_\_\_\_\_\_\_\_\_\_**

**Saturday Lunch $25.00 \_\_\_\_\_\_\_\_\_\_\_**

**Banquet (guest) $57.00 \_\_\_\_\_\_\_\_\_\_\_**

**Include guest name here\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Total Submitted $\_\_\_\_\_\_\_\_\_\_\_\_**