



A Capital Adventure

ARS/ASA Convention 2006
 Washington DC Area
 Registration Form

Please print names as you would like them to appear on the badge

Name 1

Name 2

Name 3

Name 4

Please fill out this form, detach, and return with payment to the registrars.

1	2	3	4	Event (Check boxes to left to indicate attendee's choice)	No.	Price	Total
				Early Registration (Received by April 5, 2006)		\$45	
				Late Registration (Received after April 5, 2006)		\$60	
				ARS Board of Directors Luncheon (Friday)		\$25	
				Tour A and Lunch (Saturday) Private Gardens & Brookside		\$38	
				Tour B and Lunch (Saturday) Baltimore Gardens & Arboretum		\$38	
				Saturday Buffet Banquet – Roast Beef & Salmon		\$45	
				Tour C and Lunch (Sunday) Private Gardens & McCrills		\$38	
				Sunday Banquet (Please indicate entrée selection below)			
				<i>Roasted Pork Tenderloin</i>		\$45	
				<i>Red Snapper</i>		\$45	
				Tour D Single - Blue Ridge (space available)		\$255	
				Tour D Double - Blue Ridge (indicate roommate below)		\$195	
				Tour D Triple - Blue Ridge (indicate roommates below)		\$180	
				Gregory Bald 22" x 30" Aerial Photo and CD		\$30	
				CD of plants in plant sale		\$5	
Tour D Roommates: _____ (if applicable) _____						Total Enclosed	

Indicate Special Dietary Needs or Requests for Vegetarian Meals: _____

Name: _____

Street Address: _____

City: _____ State/Province: _____ Zip code: _____ Country: _____

Phone Number: _____ Email: _____

Please indicate membership information below, and if you are a Society Officer, Director, or Chapter President:

ARS Primary Chapter: _____ Office: _____

ASA Primary Chapter: _____ Office: _____

Truss Show *Please send details*

Art and Photo Contest *Please send details*

Payment may be made by Check or VISA/MASTERCARD.

Please make your check payable to: **ARS/ASA Convention 2006.**
 All checks must be made in US Dollars drawn against a US Bank.
Confirmation will be sent by e-mail or US mail if no e-mail address is provided.

Visa MasterCard (*check one*)

Name as it appears on credit card: _____

Number: _____

Expiration date: _____

3-digit security code on the back of the card: _____

***A Capital Adventure
 Registration Dates***

April 5 Last Date Early
 Registration &
 Refund Request

April 6 Late Registration

April 20 Last Date Hotel
 Reservations

Send check or credit information with completed registration form to:

Jean and Norman Beaudry – Registrars
P.O. Box 34440
Bethesda MD 20827
E-mail: ARSASA2006@verizon.net



Comments:

- To attend any of the convention activities you must be registered.
- Your registration form must be received on or before April 5, 2006, to qualify for the early registration fee.
- Forms received after April 5, 2006 must pay the late registration fee.
- If you intend to stay at the DoubleTree Hotel in Rockville please contact them directly: (301)-468-1100 or (800)-222-TREE. Mention the code "AMR" to receive the convention rate. Make room reservations before April 20, 2006.
- Please note that additions or changes in the program may occur.
- A full refund of fees is possible if the request is received by the Registrar on or before April 5, 2006. (Refunds on credit charges will be made by check, less processing fees.)
- No registration fee will be charged for children under 12 when registering with a parent.
- These registration forms are also available online for download at: **www.arspvc.org/2006**