



ASHEVILLE 2010

**INTER-CITY VISIT
AND LEADERSHIP CONFERENCE**

SEPTEMBER 12-14, 2010

Registration Form

Name (as it appears on your driver's license) _____

Name (as you wish for it to appear on name badge) _____

Organization _____

Title _____

Mailing Address _____

City/State/Zip _____

Phone (____) _____ Cell/Alternative (____) _____ Fax (____) _____

E-mail _____

Reservations are accepted on a first-come, first-served basis. Please mail this form and your payment in full to the address below, fax your registration to 919-968-874, or register online at www.Asheville2010.com.

Double Occupancy Room: \$975 \$ _____

Roommate preference: _____

Single Occupancy Room: \$1,095 \$ _____

Roommate preference: _____

Spouse/Partner Fee (Not a conference participant): \$500 per person \$ _____

Spouse/Partner Name: _____
(as it appears on their driver's license)

Media Fee (Not a conference participant): \$300 \$ _____

Participant Name: _____
(as it appears on their driver's license)

Total Due: \$ _____

Please accept my payment in full

Total Payment included: \$ _____

Conference registration fee includes transportation to Asheville via bus, two night stay at the Renaissance Asheville Hotel, ground transportation, meals, receptions and conference materials.

Please see the reverse to complete payment information.



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Method of payment

Enclosed is my check made payable to the Foundation for a Sustainable Community

Please bill my credit card: VISA MasterCard American Express

Account No. _____ Exp. Date _____

Name of Cardholder _____

Billing Address _____

CV Code: _____ Signature _____

Please complete for hotel incidentals (your registration will not be processed without this information)

Same as above VISA MasterCard American Express

Account No. _____ Exp. Date _____

Name of Cardholder _____

Signature _____

Personal Information

Bio (a description that will be included in the conference folder) _____

Emergency Contact _____ Phone (____) _____ Relation _____

Dietary Restrictions _____

Special Needs _____

Please make a copy of this registration for your records and return the original to:

The Foundation for a Sustainable Community, P.O. Box 2407, Chapel Hill, NC 27515

Fax: 919.968.6874

For online registration or for more information visit www.Asheville2010.com

For additional information contact Laura Morrison at 357.9989 or lmorrison@carolinachamber.org