

**Registration Form - Southern Federation S.L.A.C. 2008 Mid-Winter Conference – Savannah, Georgia**      **SFSLAC Control # \_\_\_\_\_**  
**JANUARY 3 – JANUARY 6, 2008**      **(Registration must be postmarked by November 20, 2007 to receive the Early Registration prices)**

(Every attempt will be made to accommodate on-site registration; however, restrictions due to capacity limitations and space availability will apply.)

<u>First Name</u>	<u>Last Name</u>	<u>First Name Preference for Name Tag</u>	<u>Please Help Us with Other Information (circle as appropriate)</u>	<u>Registration Code **</u>	<u>Total Amount</u>
1. _____	_____	_____	Male • Female / Single • Married • Widowed	_____	_____
Optional Events (please check all that apply and add appropriate fees):			Age: <10 • 10-12 • 13-17 • 18-29 • 30-45 • 46-60 • >60		
___ Tennis Mixer (n/c) ___ Savannah Tour (n/c) ___ Ghost Tour (add \$20) ___ Paula Deen Tour (add \$38) ___ Texas Hold 'em (add \$25)				Total Optional:	_____
___ Best Ball Golf Tournament (add \$95)					
2. _____	_____	_____	Male • Female / Single • Married • Widowed	_____	_____
Optional Events (please check all that apply and add appropriate fees):			Age: <10 • 10-12 • 13-17 • 18-29 • 30-45 • 46-60 • >60		
___ Tennis Mixer (n/c) ___ Savannah Tour (n/c) ___ Ghost Tour (add \$20) ___ Paula Deen Tour (add \$38) ___ Texas Hold 'em (add \$25)				Total Optional:	_____
___ Best Ball Golf Tournament (add \$95)					

Attach additional sheets if necessary. Please use separate sheets for different addresses.  
**Full payment must accompany all registrations.**  
**A registration is for one individual and cannot be shared.**

Please ADD \$6.00 processing fee per \_\_\_\_\_ # \_\_\_\_\_  
 registrant if paying by credit card.  
**Total Payment Amount** \_\_\_\_\_

See separate form for Child Care registration. In order for us to adequately plan for Child Care, you must pre-register for Child Care (child must also be registered on this form).

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

City, State, ZIP: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Other Phone: \_\_\_\_\_

Are you a member of a Southern Federation affiliated club? \_\_\_ Yes \_\_\_ No If yes, which club? \_\_\_\_\_

Expected arrival day: Wed • Thu • Fri • Sat      Do you plan to: \_\_\_ Drive \_\_\_ Fly \_\_\_ Local

**\*\* Registration Fees:**

Please refer to the Registration Fee Schedule for all registration fees and codes.  
 Be sure to enter all codes and fees that apply per registrant.

Make checks payable to: **SOUTHERN FEDERATION – SAVANNAH MWC**

Credit Card information (circle one): VISA • M/C • AmEx • Discover  
 Card #: \_\_\_\_\_ Security Code on Card: \_\_\_\_\_ Exp Date: \_\_\_\_\_

Exact name on the card: \_\_\_\_\_

**Billing** Address for card: \_\_\_\_\_ Please Print

\_\_\_\_\_ ZIP Code: \_\_\_\_\_

Signature: \_\_\_\_\_

**Mail or Fax Form and Fees to:**  
 Gina Thomas  
 2671 Elwood Drive, NE  
 Atlanta, GA 30305  
**For registration questions & info:**  
 Call (404) 231-5532, or email:  
[reginathomas@mindspring.com](mailto:reginathomas@mindspring.com)

**Office Use:**

**Refund Policy:** 100% if request is received by November 30, 2007;  
 75% if request is received December 1 - 10, 2007;  
 40% if request is received December 11 - 20, 2007;  
 No refunds thereafter or for No Shows.  
 No refund on child or pre-teen banquet after December 20, 2007