XI STATE CONVENTION REGISTRATION

June 10-12, 2010 - 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**

Please Check All That Apply:

____ **2009-2010 Initiate**
____ **First State Convention**
____ **2008-2010 Chapter President**
____ **2010-2012 Chapter President**
____ **2009-2011 State Committee Chairman**
____ **2009-2011 Xi State Officer/Related Personnel**
____ **Past Xi State President**
____ **50 Year (+) Member, (Indicate 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.***

Registration -- Total Convention Package

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

____ **postmarked before May 1 .....$225.00**

____ **postmarked after May 1st $250.00**

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 10

_____ Thursday Dinner Buffet w/ dessert..... $25.00
_____ Thursday Night Beverage Reception .....No Charge

June11

_____ Breakfast Buffet..... $15.00
_____ Awards Luncheon..... $25.00
_____ Presidents Banquet/Reception..... $40.00

June 12

_____ Birthday Brunch..... $20.00

Dormitory Reservations -- filled by postmark date:

_____ Thursday Night (June 10) only $48.00
_____ Friday Night (June 11) only..... $48.00
_____ Both Nights (June 10 & 11) $90.00

_____ 2009-2010 Initiate..... subtract $5.00
_____ Xi State Past President ..... subtract $25.00

Total Amount Enclosed $_____

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, 4th choice =4)

____ Hodgson Dorm
____ 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)
_____

Only refunds requested in writing before May 15, 2010, 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.

Make checks payable to XI STATE CONVENTION.

Send this completed form and check to
Dr. Dorrie Powell
629 Thomas Powell Rd.
Whiteville, TN 38075
731-254-9525

powelld1@k12tn.net
powell.dorrie@gmail.com