

CHILDREN & YOUTH CONFERENCE PACKET

The second National Children & Youth Conference will be held September 18 – 20, 2009 at the Sheraton Indianapolis City Centre Hotel in Indianapolis, Indiana. This informative meeting will provide attendees, from The American Legion, American Legion Auxiliary and the Sons of the American Legion, the opportunity to exchange ideas and learn more about our outstanding programs.

HOTEL & MEETING SITE INFORMATION

The Annual Children & Youth Conference will be held at:

Sheraton Indianapolis City Centre Hotel
31 W. Ohio Street
Indianapolis, IN 46204
Phone: (317) 635-2000

Enclosed you will find the housing form that must be completed and returned **no later than August 14, 2009** to:

The American Legion
ATTN: Barb Hey, ACY
P.O. Box 1055
Indianapolis, IN 46206

To avoid duplication, roommates should only submit one housing form. Reservations received after August 14, 2009 are subject to availability and prevailing room rates.

Your reservation must include the credit card type, number and expiration date, or a check or money order. Attendees will be required to provide acceptable credit card information upon check-in at the hotel.

All hotels require one night's room and tax deposit. Rates do not include 16% state/local tax. If room is not canceled by verbal or written communication to the hotel, first night's room and tax may be charged to the individual.

REGISTRATION FORM

Registration is free and open to all interested American Legion Family members, but all registrants are required to submit a completed Registration Form. All other costs associated with attending the Annual Children & Youth Conference including, but not limited to: travel, lodging, and meals are the sole responsibility of the attendee.

AGENDA

Registration/ check-in for the conference will be held on Friday, September 18, 2009 from 3:00 p.m. – 7:00 p.m. at the Sheraton Indianapolis City Centre Hotel. The opening session will be held from 7:00 – 7:30 p.m. with a host bar reception immediately following. Saturday's general session will be from 8:00 a.m. – 5:00 p.m. A patriotic memorial service will be conducted at 7:30 am on Sunday. A continental breakfast will follow and the general session will reconvene at 9:00 am. **The conference will conclude no later than 11:00 a.m. on Sunday.** Please keep this information in mind when planning your travel arrangements.

Sheraton Indianapolis City Centre Hotel

Please mail reservation forms to: The American Legion, ATTN: Barb Hey, P.O. BOX 1055, Indianapolis, IN 46206 by August 14, 2009. This form may be copied and must be completed for each room reserved for the conference.

We strongly urge you to confirm your reservation with the hotel approx. 2 weeks after returning it!

Type of Room	# of Rooms	Rate							
King (1 bed)		\$98.00	Check in is 3:00 p.m.; Check-out Noon Roll-a-ways \$20.00 per night and the hotel has a limited amount. Self-parking is \$22.00 per night Valet Parking is \$24.00 per night						
Double (2 beds)		\$98.00							
Executive King (King bed with a Sofa Sleeper)		\$108.00							
The Sheraton is a smoke free hotel.									
Department of _____ Name _____ Address _____ _____ Telephone no. (____) _____ Arrival Date _____ Arrival Time _____ Departure Date _____ Roommate Name _____ Roommate's Arrival/Departure _____			<p>Rates do not include 16% state/local tax. Reservation cut-off is August 14, 2009 weeks prior to arrival. Reservations received after cut-off date subject to availability. All hotels require one night's room and tax deposit. If room is not canceled by verbal or written communication to the hotel, first night's room and tax may be charged to the individual.</p> <p>_____ Guarantee by using one of the following</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%;">American Express</td> <td style="width: 50%;">Discover</td> </tr> <tr> <td>MasterCard</td> <td>Visa</td> </tr> <tr> <td>Other</td> <td></td> </tr> </table> <p>Card# _____</p> <p>Expiration Date _____</p> <p>Signature _____</p> <p style="text-align: center;">OR</p> <p>Check/money order enclosed in the amount of \$ _____ (one night's deposit – made payable to hotel)</p>	American Express	Discover	MasterCard	Visa	Other	
American Express	Discover								
MasterCard	Visa								
Other									

*** NOTE: THIS FORM MUST BE COMPLETED FOR EACH ROOM RESERVED.**

