

SAL NATIONAL EXECUTIVE COMMITTEE SPRING MEETING

RETURN THIS FORM NO LATER THAN MARCH 27, 2012, TO: JOHN W. KERESTAN, SAL LIAISON, P.O. BOX 1055, INDIANAPOLIS, IN 46206. FAX NO. (317) 630-1413.

I will attend the SAL National Executive Committee meeting on Saturday and Sunday, May 5-6, 2012

Arrival Date: _____ a.m./p.m.

Departure Date: _____ a.m./p.m.

Travel by air _____ Private Auto _____

(Late check in (after 6 pm) _____). If late check in, estimate time of possible check in _____.

_____ I **will not** need a hotel reservation

_____ I will need a hotel reservation at the downtown Sheraton Hotel. **All Rooms – non smoking**

_____ Friday, May 4; _____ Saturday, May 5; _____ Other (Sunday)(Limited)
Must be official reason only

_____ Single Room - one bed, one person \$107.00/night

Any handicap needs _____
(specify)

_____ Double/Double Room - two beds, two person \$107.00/night

Name and address of person sharing room with me who I have notified, if applicable:

Your room must be secured by a credit card, no exceptions.

Card # _____

Type _____ Exp. Date _____

_____ Email Address _____

Your Name and Title

_____ Day
_____ Telephone # _____

Address _____

City, State and Zip _____

NOTES: IF YOU ARE ENTITLED TO REIMBURSEMENT, YOU MUST RETURN THIS FORM TO THE SAL LIAISON IN ORDER TO HAVE A CHECK PROCESSED AND RESERVATION.

IF YOU PLAN TO ATTEND THE MEETING AND NOT ENTITLED TO REIMBURSEMENT, YOU MUST RETURN THIS FORM TO THE SAL LIAISON IN ORDER TO HAVE A RESERVATION.

DO NOT SEND ANY DEPOSIT

DEADLINE – March 27, 2012