



REGISTRATION FORM
 52nd Annual District Two Conference
 April 24 – 27, 2008
 Richmond Marriott West Hotel
 Richmond, VA



Last Name	First Name	Altrusa Club/State
Street Address	City	State/Zip Code
Evening Phone	E-mail Address	Name on Badge

Please check all descriptions that apply to you:

Club President District Officer First Timer Past Governor
 District Committee Chair Member Delegate Alternate

CONFERENCE SCHEDULE

Thursday, April 24 th	1:00-6:00 p.m.	Special Trip to Historic Jamestowne; explore the first permanent English settlement in North America, the birth of Virginia and the United States
Friday, April 25 th	7:00-9:00 p.m.	Welcome Party
Saturday, April 26 th		Workshops, Business Session, etc.
Sunday, April 27 th		Elections, Business Session, Workshops, Installation of Officers
		Interfaith Service, Post Board meeting

ADVANCE REGISTRATION OPTIONS: (Please select one plan)

<input type="checkbox"/> Plan A – Full Registration	<input type="text"/> @	\$ 195.00	\$ <input type="text"/>
<input type="checkbox"/> Plan B – Friday only	<input type="text"/> @	\$ 95.00	\$ <input type="text"/>
<input type="checkbox"/> Plan C – Saturday only	<input type="text"/> @	\$ 95.00	\$ <input type="text"/>
<input type="checkbox"/> Jamestowne Transportation	<input type="text"/> @	\$ 28.00	\$ <input type="text"/>
<input type="checkbox"/> Historic Richmond Tour	<input type="text"/> @	\$ 10.50	\$ <input type="text"/>

LATE REGIST. FEE (POSTMARKED AFTER MARCH 25, 2008) \$ 20.00 \$

**EARLY REGISTRATION – TWO REGISTRATIONS RECEIVED BY MARCH 1, 2008
 WILL BE ENTERED FOR A \$25.00 DISCOUNT DRAWING**

Additional meal tickets available for guests. Specify number:

<input type="checkbox"/> Friday Luncheon	<input type="text"/> @	\$ 30.00	\$ <input type="text"/>
<input type="checkbox"/> Friday Dinner	<input type="text"/> @	\$ 45.00	\$ <input type="text"/>
<input type="checkbox"/> Saturday Luncheon	<input type="text"/> @	\$ 30.00	\$ <input type="text"/>
<input type="checkbox"/> Saturday Banquet	<input type="text"/> @	\$ 45.00	\$ <input type="text"/>

TOTAL PAYMENT ENCLOSED \$

Special Dietary Needs: _____

Special Physical Needs: _____

Make check payable to: Altrusa International District Two Conference Fund

Mail completed form **with** check to: Marsala Zimmer
 9840R Midlothian Turnpike
 Richmond, VA 23235