

NCLGS 2012 Winter Meeting

January 6 through 8, 2012 • Rio All-Suite Hotel & Casino • Las Vegas, Nevada

--- you can also register online at www.nclgs.org---

Name: _____ Title: _____

Company/Affiliation: _____ E-mail: _____

Preferred Mailing Address: _____
 Accompanied By: _____
(Any guest attending meetings, breaks, receptions, or other functions must register. Legislators are not subject to fee.)

Phone: _____ Fax: _____ First Time Attendee? Yes No

REGISTRATION

FEEES

REGISTRATION WILL NOT BE PROCESSED WITHOUT PAYMENT

Legislator, Staff, Member State	\$300.00	_____
Legislator, Staff, Non-Member State*	\$375.00	_____
Other State/Federal Official	\$375.00	_____
Tribal Official	\$375.00	_____
Industry	\$500.00	_____
Media	No Charge	_____
Industry Spouse/Immediate Family	\$50.00	_____

* First-time legislators from non-member states are allowed a one-time, reduced registration fee of \$300.00

PAYMENT TO NCLGS

Date form was submitted _____

Registration fee enclosed
 \$ _____ (payable to NCLGS)

Credit Card Payment
 Charge to my:
 American Express
 MasterCard Visa

Card # _____

Code: _____ Exp. Date _____

Signature _____

**CANCELLATION POLICY: HALF REFUND UP TO DECEMBER 16; NO REFUND AFTER DECEMBER 16.
 CANCELLATIONS WILL ONLY BE ACCEPTED IN WRITING.**

***You should receive a NCLGS registration confirmation within one week of submittal,
 if you do not, please contact our office.***

For Internal Use Only

ID# _____ Registration # _____ Processed ____/____/____ Processed By _____

HOTEL CUT-OFF DATE IS DECEMBER 12, 2011

Rooms in the NCLGS room block are limited in number and may sell out prior to this date. If rooms sell out, NCLGS will apprise you of overflow options.

HOTEL RESERVATIONS CANNOT BE MADE WITHOUT PAID MEETING REGISTRATION

HOTEL ACCOMMODATIONS NEEDED? YES NO

Legislators \$59.00*

All Others \$59.00*

*plus taxes and fees, currently totaling 12%.

Arrival Date: ____/____/____

Departure Date: ____/____/____

Room preferences: _____

ANY CHANGES MADE WITHIN 7 DAYS OF ARRIVAL WILL RESULT IN A PENALTY EQUAL TO ALL NIGHTS ORIGINALLY RESERVED. ALL CHANGES MUST BE MADE THROUGH THE NCLGS NATIONAL OFFICE.

For Internal Use Only

E-mail confirm date _____ Updated in DB

HOTEL PAYMENT

All room reservations must be guaranteed by an accepted credit card or accompanied by a check for a deposit payment equal to one night's fee *plus tax* made payable to: **Rio All-Suite Hotel & Casino.**

Indicate below method of guarantee:

Check Enclosed (amount: \$ _____)

Charge to my:

Same Account as Above American Express

MasterCard Discover

Visa Diners Club

Card # _____

_____ Exp. Date _____

Signature _____

The above signed authorizes the Rio All-Suite Hotel to charge this card for the initial deposit, as well as for cancellation, no-shows & early departures.

Mail or fax this form to:

NCLGS • 385 Jordan Road • Troy • NY • 12180 • Tel: 518-687-0615 • Fax: 518-687-0401

E-mail: info@nclgs.org • Website: www.nclgs.org