



Name \_\_\_\_\_

Name \_\_\_\_\_

(Full name as you would like for them to appear on your name badge)

Address \_\_\_\_\_

City/State/Zip Code \_\_\_\_\_

Phone \_\_\_\_\_ Rose Society \_\_\_\_\_

EMAIL \_\_\_\_\_

List any dietary restrictions \_\_\_\_\_

**Conference registration includes all programs and district luncheon**

**Before September 15th \$35.00 each**

Friday & Saturday registration Number attending \_\_\_\_\_ total \$ \_\_\_\_\_

**After Sept. 15th, \$40.00 each**

Friday & Saturday Number attending \_\_\_\_\_ total \$ \_\_\_\_\_

Donation (optional) \$5 \_\_\_\_\_ \$10 \_\_\_\_\_ \$20 \_\_\_\_\_ \$25 \_\_\_\_\_ Other \_\_\_\_\_ \$ \_\_\_\_\_

Total enclosed \$ \_\_\_\_\_

Please consider a donation for the silent auction

**Contact the Fairfield Inn directly for Reservation by September 20th:**

**Phone: (217) 540-5454 Discount code: ROSE SOCIETY**

**Hotel rate: \$129.00 plus taxes and fees**

**1111 North Henrietta St., Effingham, IL**

6:30 pm – Friday Evening informal gathering will be at the Fairfield Inn light snacks and refreshments will be provided. Let us know if you are joining us. Yes \_\_\_\_\_ NO \_\_\_\_\_

**Checks payable to: Illinois-Indiana Rose District**

Name as it appears on credit card: \_\_\_\_\_

Credit Card No. \_\_\_\_\_ Expiration Date \_\_\_\_\_ Code \_\_\_\_\_

**Mail registration form and check to:**

Sonja Lallemand  
10309 Old Highway 13, Murphysboro, IL 62966

Questions?

Contact: Sharon Shipp, District Director

**Registering late? text Sonja: 618-203-6657 and turn in Registration at the conference**