

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 \_\_\_\_\_

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CONFERENCE REGISTRATION INCLUDES ALL PROGRAMS AND DISTRICT LUNCHEON

Before March 14<sup>th</sup> \$40.00 each

## Friday & Saturday registration

Number attending \_\_\_\_ total \$ \_\_\_\_

After March 14<sup>th</sup>, \$45.00 each

## Friday & Saturday

Number attending      total \$

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

**Please consider a donation for the silent auction**

**Contact the Fairfield Inn directly for Reservation by March 15th:  
Phone: (217) 540-5454 Discount code: ROSE SOCIETY  
Hotel rate: \$118.00 plus taxes and fees**

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:**

## REGISTRATION

10309 Old Highway 13, Murphyboro, IL 62966

Registering late? Text Sonia 618-203-6657 and bring registration to the meeting.

## Questions?

Contact: Sharon Shipp, District Director