



**REGISTRATION FORM** (Please print legibly or type)

You can register online at [www.rizones29-30.org](http://www.rizones29-30.org). You can fax this form to 865-357-9571.

ROTARIAN
Last Name _____
First Name for Badge _____
E-mail: _____
Contact phone: _____
Rotary Position 2008-09 when I attend the Institute: (e.g. PDG, DG, DGE, PRID) _____
District: _____
Vegetarian Meals? _____ (Yes or No)
I will volunteer for: (1 for first choice, 2 for second choice, etc.) _____ Sgt.-at-Arms _____ Rotary Choir _____ Recorder _____ Event Coordinator _____ House of Friendship _____ Registration Desk

SPOUSE/GUEST
Last Name _____
First Name for Badge _____
If Rotarian, club name _____
Rotary Position 2008-09 when I attend the Institute: (e.g. Rotarian, AG, Club President) _____
Vegetarian Meals? _____ (Yes or No)
I will volunteer for: (1 for first choice, 2 for second choice, etc.) _____ Sgt.-at-Arms _____ Rotary Choir _____ Recorder _____ Event Coordinator _____ House of Friendship _____ Registration Desk

**PLEASE BE SURE TO UPDATE YOUR DIRECTORY INFORMATION FORM AND RETURN WITH YOUR REGISTRATION SO YOU WILL BE LISTED CORRECTLY IN THE 2008 ZONE DIRECTORY**

I (we) will attend (check all that apply):

<b>Seminar for Governors-Elect &amp; Spouses (GETS) Sept. 9-11</b> DGE _____ Spouse _____ (For DG 2009-10 and spouses only)	No fee payment required at this time. Billed to district
<b>Seminar for Governors-Nominee &amp; Spouses (GNATS) Sept. 9-11</b> DGN _____ Spouse _____ (For DG 2010-11 and spouses only)	No fee payment required at this time. Billed to district
<b>Seminar for District Governors &amp; Spouses, Sept. 11</b> DG _____ Spouse _____ (For DG 2008-09 and spouses only)	No fee payment required at this time. Billed to district
<b>“Train the Trainer” Seminar Sept. 10-11</b> Registrant _____ Spouse/Guest _____	Fee: \$60.00 per registrant
<b>Rotary Institute Sept. 11-14</b> Registrant _____ Spouse/Guest _____	Fee: \$295.00 per registrant

**PAYMENT**

	NUMBER	TOTAL
Rotary Institute @ \$ 295.00 .....	_____	\$ _____
Train the Trainer @ \$60.00 .....	_____	\$ _____
Wednesday dinner (optional) for DGs and spouses, Train the Trainer participants and spouses @ \$55.00 per person .....	_____	\$ _____
Indianapolis Symphony ADDITIONAL tickets @ \$50.00.....	_____	\$ _____
(ONE symphony ticket is provided at no charge for each individual who registers for the Institute compliments of Rotary Districts 6560 and 6580)		
If pre-registered in Springfield, deduct \$25.00 per registrant .....	_____	\$ - _____
Less early registration discount (before July 1) \$25.00 per registrant .....	_____	\$ - _____
<b>TOTAL PAYMENT</b> .....		<b>\$ _____</b>

To pay by Visa, MasterCard, AmEx or Discover: Name on Card \_\_\_\_\_  
 Card Number \_\_\_\_\_ Expiration Date \_\_\_\_\_ Security Code \_\_\_\_\_  
 (3 digits on back of card)  
 Signature: \_\_\_\_\_

**To pay by check:** Make check payable to “Rotary Zones 29/30 Institute” and mail:  
 PDG Karen Wentz, Institute Registrar, 8673 Belle Mina Way, Knoxville, TN 37923, Phone and Fax: 865-357-9571,  
 e-mail: [institute@rizones29-30.org](mailto:institute@rizones29-30.org).

Make your hotel reservation at the Indianapolis Hilton by August 9. Phone 800-682-7058

DETACH AND MAIL