

# NAFSA 2012 ANNUAL CONFERENCE & EXPO

## PRIVATE MEETING/EVENT SPACE REQUEST FORM

NAFSA holds hotel space for private meetings and events. Secure space for your event by submitting this form with payment.

NAME OF GROUP: \_\_\_\_\_

DAY & DATE OF EVENT: \_\_\_\_\_

### USE A SEPARATE FORM FOR EACH MEETING. PLEASE FILL OUT COMPLETELY.

| TYPE OF EVENT                      | START TIME OF EVENT   | ENDING TIME OF EVENT  |
|------------------------------------|---|---|
| <input type="checkbox"/> Meeting   | _____ <input type="checkbox"/> a.m. <input type="checkbox"/> p.m. | _____ <input type="checkbox"/> a.m. <input type="checkbox"/> p.m. |
| <input type="checkbox"/> Breakfast | _____ <input type="checkbox"/> a.m. <input type="checkbox"/> p.m. | _____ <input type="checkbox"/> a.m. <input type="checkbox"/> p.m. |
| <input type="checkbox"/> Lunch     | _____ <input type="checkbox"/> a.m. <input type="checkbox"/> p.m. | _____ <input type="checkbox"/> a.m. <input type="checkbox"/> p.m. |
| <input type="checkbox"/> Dinner    | _____ <input type="checkbox"/> a.m. <input type="checkbox"/> p.m. | _____ <input type="checkbox"/> a.m. <input type="checkbox"/> p.m. |
| <input type="checkbox"/> Reception | _____ <input type="checkbox"/> a.m. <input type="checkbox"/> p.m. | _____ <input type="checkbox"/> a.m. <input type="checkbox"/> p.m. |

ESTIMATED ATTENDANCE: \_\_\_\_\_ ROOM SET:  Theater  Rounds  Conference  Other \_\_\_\_\_

ORGANIZER'S NAME: \_\_\_\_\_

ORGANIZATION: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE/PROV: \_\_\_\_\_ ZIP/POSTAL CODE: \_\_\_\_\_ COUNTRY: \_\_\_\_\_

E-MAIL: \_\_\_\_\_ TEL: \_\_\_\_\_ FAX: \_\_\_\_\_

### **A NONREFUNDABLE PROCESSING FEE OF \$375 (USD) IS REQUIRED PER EVENT.**

**SPACE ASSIGNMENTS WILL BE CONFIRMED ON OR ABOUT APRIL 10, 2012.**

Check payable to NAFSA enclosed: Check # \_\_\_\_\_ (Must be drawn on a U.S. bank in U.S. funds)

AMEX  MasterCard  VISA Credit Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Name as it appears on card: \_\_\_\_\_

Signature of card holder: \_\_\_\_\_

Disclosure: Space reserved by NAFSA for affiliate groups may be subject to a room rental charge should the assigned hotel deem that the food and beverage totals fall below the required minimums.

### **DEADLINE FOR SUBMISSIONS: FEBRUARY 24, 2012**

RETURN FORM TO: Nadia Aboulhoda, NAFSA Conferences & Meetings Department  
1307 New York Avenue, NW, 8th Floor, Washington, DC 20005-4701, USA  
E-mail: [Nadiaa@nafsa.org](mailto:Nadiaa@nafsa.org) • Fax: +1.202.737.3657