

Registration Form

Return this form with payment by May 8, 2009

Mail to: GLHF, 638 North 18th Street, Suite 108, Milwaukee, WI 53233

Name: _____

Address: _____

Phone: _____ Email: _____

People in your party (First and Last name)	AGE	Indicate Nannies (N)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Number Attending Saturday Dinner at Olympia _____ # adults _____ # children

Guest Rooms:

- A nonrefundable fee of \$60 is required to secure one guest room for Saturday night.

Room Fee (\$60 for each room you require): \$ _____

A nonrefundable registration fee of \$25 per family: \$ **25**

- A nonrefundable registration fee of \$50 is due for any guest who is not an immediate family member (parent, sibling, spouse, significant other) who will be attending the conference.

(nonrefundable \$50/person) \$ _____

TOTAL \$ _____

**Actual cost of the weekend per family is \$550

For reservations on Friday evening, June 12th, (stay at your own expense--\$109) call Olympia Resort to make reservations, 262-369-4999, and indicate the GLHF Fun & Education Weekend.

METHOD OF PAYMENT: (please check one)

Check (Make payable to: Great Lakes Hemophilia Foundation)

Visa/Master Card (Circle one)

Credit Card Number

exp. date

Signature