

Professional Development
DIRECT BILL Registration / Room Reservation Request

Name: _____

Event & Date: _____

Event Registration (Required only if you wish to have the registration billed directly to the district.)

_____ I am registered for the event and it will be direct billed to the district for the amount of \$_____.

_____ I am NOT registered for the event and would like to be registered and have it direct billed to the district for the amount of \$_____. (Registration information attached)

The bill will be coming from _____.

Room Reservation (Required only if you wish to have the hotel expenses billed directly to the district.)

_____ I have room reservations at _____. They will direct bill the district for the amount of \$_____.

Please fax the sales tax exemption form to (____)_____.

_____ I do NOT have room reservations and would like them to be made at the following location:

1st Choice _____ (____) _____
Hotel Phone

2nd Choice _____ (____) _____
Hotel Phone

3rd Choice _____ (____) _____
Hotel Phone

Date of Check-in _____ Date of Check-out _____

Please have it direct billed to the district.

() Two Beds () One Bed

If you have the district office make reservations and you are unable to attend, an email notification that you are not planning to attend must be sent to the district office in time to prevent charges to the district. If you fail to cancel your registration and/or reservations in a timely manner which results in a charge or charges to the district, you will be required to reimburse the district for these expenses.

Will your total expenses be in excess of \$400? YES _____ NO _____