

DELEGATE REGISTRATION FORM

PLEASE PRINT OR TYPE

NAME _____ NAME OR YOUR
LSC/LDC/LMSC/ASSN _____

ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

TELEPHONE NUMBER & AREA CODE (home) _____ (office) _____

FAX NUMBER _____ E-MAIL _____

FIRST NAME OR NICKNAME FOR BADGE _____

SPORT (CIRCLE) USA-S USD USSS USMS USAWP

REGISTRATION FEE: Postmarked by August 6, 2005 (early bird).....\$110.00
Postmarked by August 7, 2005 or later..... \$135.00

YOU MUST REGISTER TO ATTEND ANY OF THE MEETINGS OR TO BE ELIGIBLE FOR THE SPECIAL CONVENTION ROOM RATE. This registration form must be accompanied by:

- 1) Your check or money order for the appropriate registration fee (**\$110.00** or **\$135.00**)
Made payable to **UNITED STATES AQUATIC SPORTS (USAS)**.
- 2) You are responsible for making your hotel reservations directly with the Sheraton Greensboro Hotel At Four Seasons, by means of the provided reservations form. All reservations and reservations changes must be made by you with the hotel by calling the Sheraton Greensboro Hotel at Four Seasons at: 800-242-6556 or 336-292-9161 or fax your reservation form to: 336-323-4876 or by going on line and registering at:
<http://www.sheratongreensboro.com>

Scroll down to bottom of page where you will be asked for group code: USI09K

REGISTRATION REFUND POLICY: Full refund of your registration fee will be made upon receipt of a written request that must be received by **August 31, 2005**.

SEND THIS FORM WITH YOUR REGISTRATION FEE TO:

**BOB & HELEN BROWN, UNITED STATES AQUATIC SPORTS, INC.
16700 INDIGO ROAD
LAKEVILLE, MN 55044-5613**

DO NOT MAIL ANYTHING TO THE ABOVE ADDRESS AFTER SEPTEMBER 3, 2005

Hand carry the forms and register at the Convention Registration Desk.

Please note that all on site registrations must be paid for by cash or a check.