



# FIRST VICE DISTRICT GOVERNORS/DISTRICT GOVERNORS-ELECT SEMINAR

ST. CHARLES, IL, USA • MONDAY, FEBRUARY 1 - FRIDAY, FEBRUARY 5, 2021



## REGISTRATION AND TRAVEL FORM

**DEADLINE - FRIDAY, OCTOBER 30, 2020**

### REGISTRATION INFORMATION

**ATTENDEE** (Please type or print name as it appears on passport/photo ID.)

First/Given Name

Last/Family Name

Badge/Call Name

Address

City

State/Province

Postal Code

Country

Daytime Phone

E-Mail

Club #

Membership #

District

Title

Faculty/Group Leader Last Name

Classroom Group #

The FVDG/DGE Seminar in St. Charles is exclusively for the First Vice District Governor/District Governor-Elect. Companions may not attend.

### Q CENTER HOTEL ROOM RESERVATIONS

LCI will pay for one room, single occupancy with one twin-sized bed at Q Center (location of the training) for the LCI approved dates only.

**ARRIVAL: MONDAY, FEBRUARY 1 DEPARTURE: FRIDAY, FEBRUARY 5**

Special Requirements: Wheelchair Accessible Other

Special Needs in the Hotel Room:

• Special Needs Rooms are limited and subject to availability. If applicable, please complete the Special Needs Form and return to dgeseminar@lionsclubs.org

Extended arrival or departure, guaranteed bed type, early check-in and late check-out fees and taxes are a personal expense. Please change to:

Requested check-in date: Requested check-out date:

• Type of bedding, early arrivals and/or late departures and special requests are subject to hotel availability.

### DIETARY REQUIREMENTS

No Restrictions

Indian Vegetarian

Vegetarian

Other:

### EMERGENCY CONTACT INFORMATION

Emergency Contact Name:

Emergency Contact Phone Number:

**CONTINUE TO PAGE 2**

### TRAVEL INFORMATION

If you will not be flying, please indicate the mode of transportation you will be using instead:      Driving      Other \_\_\_\_\_

#### ATTENDEE

Passport Surname / Last Name      Passport Given / First Name      Passport Middle Name

Passport Number      Country of Issue      Expiration Date MM/DD/YY

Date of Birth MM/DD/YY      Gender:      Male      Female

Departure Date\* MM/DD/YY      Preferred Departure Time      Morning      Mid Day      Evening

Preferred Routing

**\*Must align with Lions International approved travel dates**

Return Date\* MM/DD/YY      Preferred Return Time      Morning      Mid Day      Evening

Preferred Routing

**\*Must align with Lions International approved travel dates**

Preferred Airport      Seating Preference      Aisle      Center      Window

Special Meal Request (If Applicable)      Frequent Flyer Program Name(s)      Number(s)

Wheelchair or Airport Assistance Required\*\*      Oxygen Tank Needed in Flight\*\*      Traveling with a Guide/Leader Dog\*\*

**\*\*Additional charge considered a personal expense**

- Please submit all pages of completed form once via mail, fax, or email • Allow 4 weeks for processing.
- Mail: Lions Clubs International, Attn: Convention Division, 300 West 22nd Street, Oak Brook IL 60523-8842, USA
- Fax: (630) 571-1689
- Email: dgeseminar@lionsclubs.org
- Please note: Lions Clubs International will be documenting LCIcon for promotional purposes. Your participation may be filmed or photographed at this event.
- Your registration is your consent for use of images by Lions International.
- To avoid a duplicate, please do not mail original if faxed or emailed.
- LCI INTERNAL USE ONLY - TRAVELER TYPE: FVDG/DGE - ACCOUNT CODE: 3505-522000