

# 2010 OHIO LIBRARY COUNCIL TRUSTEE DINNERS

## REGISTRATION FORM

Use one form per registrant. Make copies for additional registrants.

Please type or print all information.

Name \_\_\_\_\_

Library/Institution \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Daytime Telephone \_\_\_\_\_

E-Mail \_\_\_\_\_

Special dietary needs. Explain: \_\_\_\_\_

### PROGRAM SITES [check box next to dinner you are attending]

- Northeast Ohio** – Tues., March 30, Kent State University Student Center, Kent
- Central Ohio** – Wed., April 7, Ramada Hotel & Conference Center, Columbus
- Southwest Ohio** – Thurs., April 8, Roberts Conference Centre, Wilmington
- Northwest Ohio** – Wed., April 21, Stone Ridge Golf Club, Bowling Green
- Northern Ohio** – Thurs., April 22, Holiday Inn – Cleveland South, Independence
- Southern Ohio** – Tues., April 27, Christopher Conference Center, Chillicothe
- Eastern Ohio** – Wed., April 28, Muskingum County Library, Zanesville

**REGISTRATION FEE:** \$35

### PAYMENT INFORMATION

- Check Enclosed: made payable to Ohio Library Council
- Credit Card: \_\_\_ Visa \_\_\_ Mastercard \_\_\_ AmEx

Card #: \_\_\_\_\_ 3 or 4 digit security code [on back of card]: \_\_\_\_\_

Exp. Date \_\_\_\_\_ Signature \_\_\_\_\_

Credit Card Billing Address (if different than above): \_\_\_\_\_

Purchase Order: # \_\_\_\_\_

<b>OFFICE USE ONLY</b>
Batch #: _____
Reg. #: _____
Ck or CC Ref. #: _____
Amt. Rec.: _____

Mail completed form to: **Ohio Library Council, 1105 Schrock Rd., Ste. 440, Columbus, OH 43229-1174**, or fax to **(614) 410-8098**. To avoid double billing, please do not follow faxed credit card registration or online registration with paper registration.