

AMERIPLAN® 2010 FAMILY REUNION REGISTRATION AND HOTEL ACCOMMODATIONS FORM

AMERIPLAN
ANNUAL FAMILY REUNION
JUNE 23RD ~ JUNE 26TH 2010
HILTON ANATOLE HOTEL | DALLAS, TX

Register by 11:59pm (CST) Monday - May 31, 2010 to get the Early Bird Special.

Book your room at the Anatole by May 15 & qualify for \$75 in Sales Certificates!

TO CONTACT US:

For assistance or to make changes to your registration, please call Stacia Waymire at 469-229-4020. M-F 9am - 4pm CST or email us at support@apfamilyreunion.com DO NOT submit a new registration form for changes. If you are registering for more than one IBO (other than spouse/partner), please make copies of this form and fill out one form per IBO.

TO REGISTER:

ON-LINE registration is the fastest and easiest. Go to your Online Back Office or apfamilyreunion.com/register to register now!

OR FAX completed form with credit card payment information to Creshawn Harris at 469-229-4525.

OR MAIL completed form with payment to AmeriPlan® • P.O. Box 678262 • Dallas, Texas 75267-8262

Faxed and mailed forms will be assigned the best available seating section at the time registration is received.

The deadline for registration is JUNE 21, 2010 at 5pm CST. Anyone attending any AmeriPlan function MUST be registered.

ATTENDEE REGISTRATION INFORMATION

Mr. Mrs. Ms. (Please provide name as you would like it to appear on your name badge)

Last: _____ First: _____ M.I.: _____

Address: _____

City: _____ State: _____ Zip Code: _____

E-mail: _____

IBO #: _____ Pin Level: _____

Check here if you are a first time attendee.

Additional Info

Primary Phone #: (_____) _____

Vegetarian Meals

Wheelchair Attendee

Other Restrictions _____

2010 Ticket Prices:
(Prices are per person and do not include hotel accommodations)

\$219 by 5/31
Early Bird Special!

\$249 (6/1-6/21)

\$219 NEW IBO
SPECIAL! (NEW IBOs
enrolled on or after
4/01/10)

SPOUSE/PARTNER REGISTRATION INFORMATION

Mr. Mrs. Ms. (Please provide name as you would like it to appear on your name badge)

Last: _____ First: _____ M.I.: _____

IBO # (if applicable): _____

Vegetarian Meals

Wheelchair Attendee

Other Restrictions _____

\$219 by 5/31
Early Bird Special!

\$249 (6/1-6/21)

\$219 NEW IBO SPECIAL!

HOTEL ACCOMMODATIONS INFORMATION

DATES: Family Reunion activities begin with the Open House at our Corporate Headquarters on Wednesday, June 23, and end with the AmeriPlan Fun Night on Saturday, June 26. Extensions and Special Room Rate prior to an arrival date of June 23 and past a departure date of June 27 are subject to availability. Check our Agenda on APFamilyReunion.com

RESERVATIONS: You must be registered as a guest at the Hilton Anatole in order to attend the AmeriPlan-sponsored meal functions. If you are sharing a room with another attendee, only **ONE** of you should reserve a room. The room should be reserved by the person who is paying for the first night's room and tax. Reservations received after June 11 cannot be guaranteed and are subject to availability. No reservations will be accepted after June 21, 2010. Please indicate how you will handle your accommodations below.

Please reserve a room for me at the Hilton Anatole Hotel under my name:

Arrival Date: _____ Departure Date: _____ Total # Nights: _____

Room Type: Single (1 person) \$150 Double (2 people, 1 bed) \$150 Db/Dbi (2 people, 2 beds) \$150 Triple \$171 Quad \$195

Special Needs: _____

Roommate #1 (if other than spouse/partner): _____ Roommate #2: _____ Roommate #3: _____

I am already sharing a room at the Hilton Anatole Hotel with (name of person paying first night's deposit): _____

RATES: In order to take advantage of the special hotel rate, please DO NOT contact the hotel directly. **All reservations must be made through Sunbelt.** A NON-REFUNDABLE first night's room, tax and fees deposit of \$150 (single, double, or double/double), \$171 (triple) or \$195 (quad) is required at the time of registration. You will be responsible for your remaining hotel nights made payable directly to the Hilton Anatole Hotel at the time of check-out.

PAYMENT INFORMATION

REGISTRATION PAYMENT/CANCELLATION GUIDELINES: Full payment is due at the time of registration. Your registration will not be accepted without payment. Cancellations and refund requests must be submitted in writing. Refund requests postmarked by May 15, 2010 will receive a full refund. Requests postmarked between May 16 and May 31, 2010 will receive a refund LESS 50%. Refund requests postmarked after May 31, 2010 will not be honored. Name change requests must be received in writing prior to May 21, 2010. The original registrant must submit the request for substitution and is responsible for all registration fees, as well as a \$35.00 processing fee payable at the time of substitution.

PAYMENT METHOD:

Check or Money Order: Make checks payable to Sunbelt and mail with this form.

Credit Card (check one): AmEx Visa MasterCard

Cardholder's Name (please print): _____

Card Number: _____ Expiration Date: ____/____/____

Cardholder Signature: _____

PAYMENT TOTALS

attendees x \$ _____ ticket price = \$ _____

hotel room deposit = \$ _____

TOTAL \$ _____