

THE DEMOCRACY SYMPOSIUM

February 16-18, 2002 • Williamsburg, Virginia

Please Print

REGISTRATION FORM

Please Print

NOTE: You may also register online at www.democracysymposium.org

Name _____ Title _____

Organization _____

Address _____

Phone _____ Fax _____ E-mail _____

First Name or Nickname to use on Name Tag _____

The luncheon has been planned to provide registrants with the opportunity to discuss panel topics. Please number the order of your preference for participation:

_____ Panel A _____ Panel B _____ Panel C _____ Panel D

PAYMENT

Registration Fee _____ \$600 if received by December 15, 2001
_____ \$750 if received after December 15, 2001
_____ On-site registration will be on a space-available basis.
_____ \$50 per guest you wish to bring to the reception
and dinner on Sunday
Total: \$ _____ Payment by check or credit card must accompany registration.
Make checks payable to The Democracy Foundation.



Credit Card Information: Visa Master Card Amex

Card Number _____ Expiration Date _____

Name (print) _____

Signature _____

If paying by credit card, you may fax this form to (703) 516-4057.

Name of Guest(s) for Name Tags _____

Check Appropriate Boxes:

I would like vegetarian meals. My guest(s) for the Sunday dinner would like a vegetarian meal.

Special Needs: Please check if you have a disability, and attach a written description of your needs.

For registrations submitted by January 25, 2002, shuttle service to and from the airports and train station is available. Contact us for details at (703) 516-4056.

**Mail Registration Form & Check to:
The Democracy Foundation
1600 North Oak Street, Suite 1412
Arlington, Virginia 22209-2757**

Office Use Only: Date Received _____

Date Entered _____

Luncheon Table _____