



Section 106 Essentials Rooming Registration Form

Fax to Diane Secchi, ACHP, at 202-606-5073 by MARCH 1, 2006

You will receive an email from Diane acknowledging your room at Hotel Normandie.

Your confirmation number from the hotel will be sent to you in April.

Registration Information

Registrant:

(Last Name)

(First Name)

(MI)

E-mail Address (required for hotel acknowledgment/confirmation): _____

Hotel and Travel Information:

Arrival date: _____

AM

PM

Departure date: _____

AM

PM

of guests : _____

\$130.00 per night

\$148.00 Junior Suite

Superior(King)

Double Bed

King Bed

Accessibility: The ACHP schedules all courses in facilities that meet federal accessibility requirements. Officials sending an employee with special accessibility needs should contact Diane Secchi @ 202-606-8521.

*Note: quoted prices do not include city, county, state or federal taxes or charges. Currently, the Hotel tax is 9%, bellman charges are \$2.50 per person round trip, and maid \$0.50 per person per day.

Credit Card Information – *Required to guarantee room

Name on the card (please print):

(Last Name)

(First Name)

(MI)

Agency/Business Address: _____

City: _____

State: _____

Zip Code: _____

Card# _____ Exp. Date: _____

Signature: _____

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