



# 90th ANNUAL MEETING

Wed., Oct. 1 - Sat., Oct. 4, 2008  
JW Marriott, Washington, D.C.

## MEETING REGISTRATION INSTRUCTIONS

Complete this form if you are registering **two or more people** from your firm for meeting participation. Use the back of this form if you are registering only one person for meeting participation, plus a spouse or one guest, as applicable, who will only be attending meal functions.

Completed form and payment must be received by **Sep. 5, 2008** for advance registration rates. Please retain a copy of this form for your records.

For fastest service, register online and pay with credit card at [www.selectedfuneralhomes.org](http://www.selectedfuneralhomes.org). Follow the links to the 2008 Annual Meeting. Or, if paying by credit card, you may fax this completed form to Selected at 1-847-236-9968.

If paying by check, allow five days minimum for mailing. Mail completed form and payment to: **Selected Independent Funeral Homes**  
500 Lake Cook Road, Suite 205  
Deerfield, IL 60015

All amounts are shown in U.S. dollars. Cancellation of registration and/or meal packages received prior to Sep. 23 will result in full refund less a service charge of \$100.00. Cancellation received after Sep. 23 will result in refund for registration only (not meals) plus the \$100.00 charge.

## HOTEL RESERVATIONS

Must be made directly with hotel by **Sep. 5, 2008**.

**JW Marriott Hotel**  
1331 Pennsylvania Avenue  
Washington, D.C. 20004  
Toll-free: 1-800-266-9432  
Local: 202-393-2000

A special room rate of \$259 per night, and other special rates, are available only to Selected members. Use the online Marriott Passkey system. Go to [www.selectedfuneralhomes.org](http://www.selectedfuneralhomes.org), and follow the links to the 2008 Annual Meeting. If making reservations by phone, identify your membership in Selected Independent Funeral Homes.

Rooms are filled on a first-come, first-served basis. Once our room block is filled, we cannot guarantee availability, so members are urged to make reservations as early as possible!

# REGISTRATION FORM for MEMBER FIRM with two or more people attending meeting sessions

See instructions at left. If registering only one person for meeting participation, use Individual Person form on other side.

*If your firm is a New Member (joined after 9/30/07), or if this is your firm's first Annual Meeting, please contact Selected Headquarters at 1-800-323-4219 before completing this form.*

Complete additional copies of this form, if registering more than three people. Please print or type:

NAME OF FIRM (main location) \_\_\_\_\_

CITY \_\_\_\_\_

STATE / PROVINCE \_\_\_\_\_

EMAIL \_\_\_\_\_

### REGISTRANT #1

LAST NAME \_\_\_\_\_

FIRST NAME \_\_\_\_\_

INITIAL \_\_\_\_\_

NICKNAME FOR BADGE \_\_\_\_\_

MEAL CHOICE (see section below):

EMAIL \_\_\_\_\_

CELL PHONE (for on-site, emergency use only) \_\_\_\_\_

- FULL MEAL PACKAGE MEAL  
 SESSION MEAL PACKAGE  
 OPENING RECEPTION  
 CLOSING BANQUET

### REGISTRANT #2

LAST NAME \_\_\_\_\_

FIRST NAME \_\_\_\_\_

INITIAL \_\_\_\_\_

NICKNAME FOR BADGE \_\_\_\_\_

MEAL CHOICE (see section below):

EMAIL \_\_\_\_\_

CELL PHONE (for on-site, emergency use only) \_\_\_\_\_

- FULL MEAL PACKAGE MEAL  
 SESSION MEAL PACKAGE  
 OPENING RECEPTION  
 CLOSING BANQUET

### REGISTRANT #3

LAST NAME \_\_\_\_\_

FIRST NAME \_\_\_\_\_

INITIAL \_\_\_\_\_

NICKNAME FOR BADGE \_\_\_\_\_

MEAL CHOICE (see section below):

EMAIL \_\_\_\_\_

CELL PHONE (for on-site, emergency use only) \_\_\_\_\_

- FULL MEAL PACKAGE MEAL  
 SESSION MEAL PACKAGE  
 OPENING RECEPTION  
 CLOSING BANQUET

	ADVANCE REGISTRATION Received by 9/5/08	LATE REGISTRATION Received after 9/5/08	Enter QUANTITY	Enter AMOUNT
<b>MEETING REGISTRATION</b> for two or more people from a firm. Includes admission to all meeting sessions and access to Selected's hospitality area with beverages.	<b>\$695.00</b>	<b>\$795.00</b>	1	

MEAL OPTIONS: **FULL MEAL PACKAGE: \$595.00 per person.** See other side for details. Also check appropriate box(es) in above section under meal choice.

**SESSION MEAL PACKAGE ONLY: \$295.00 per person.** See other side for details. Also check appropriate box(es) in above section under meal choice.

**WED. EVENING OPENING RECEPTION ONLY: \$135.00 per person.** See other side for details. Also check appropriate box(es) in above section under meal choice.

**SAT. EVENING CLOSING BANQUET ONLY: \$245.00 per person.** See other side for details. Also check appropriate box(es) in above section under meal choice.

For more information regarding meal options or to indicate special requests or needs, please contact Amy Hunt or Angie Stark at Selected Headquarters: 1-800-323-4219 or [info@selectedfuneralhomes.org](mailto:info@selectedfuneralhomes.org).

**TOTAL:** \_\_\_\_\_

## METHOD OF PAYMENT

CHECK payable to Selected Independent Funeral Homes. See mailing instructions at left.

CREDIT CARD:  AMERICAN EXPRESS  DISCOVER  MASTERCARD  VISA

CARDHOLDER NAME \_\_\_\_\_

CARD NUMBER \_\_\_\_\_

EXPIRATION \_\_\_\_\_

SIGNATURE \_\_\_\_\_

