



Rotaractor Registration Form

March 2-4, 2017

Please fill in information requested and include payment for the full amount.

Please fill out form online and print out, or print carefully using blue or black ink. All blanks must be completed.

Rotaractor's Last Name: _____ First Name: _____

Badge Name: _____ District #: _____

Club Affiliation: Rotaract Club of _____

Your Current Club Title: _____ # Members in Club: _____

Rotaractor's email address: _____

Credit Card BILLING address: _____
street or PO Box

_____ city _____ ST _____ Zip Code _____

Rotaractor's phone number contact info: _____ Date Submitted: _____

Describe any dietary restrictions (Vegetarian, Vegan, Observing Lent, Gluten Free, Seafood, None): _____

PAYMENT INFORMATION - Total Fee is \$150.00 (covers 4 meals)

Payment for Florida Rotary PETS is by check or credit card only. **All Payments must be made in advance.**

If paying via credit card, please provide the full number, expiration month/year and CSC Code (or you can call with that information if you prefer not to mail in writing.) **Billing address above MUST be same as card used.**

MasterCard or Visa _____
 AmerExp or Discover enter account # _____ Exp mon/year

_____ CSC Code on Credit Card _____
Signature

Or, if paying by check - make check payable to Florida Rotary PETS.

Mail completed form (and check if not using card) to: Debbie Maymon, 2804 Kinsington Cir., Weston, FL 33332. (Contact 954-249-8489 if you have any questions or to provide credit card info.)

Note: if paying by credit card only - form can be emailed to: DMaymon@tng.com
You will receive email verification that your registration and payment have been received.