



LIONS CLUBS INTERNATIONAL FIRST VICE DISTRICT GOVERNORS/DISTRICT GOVERNORS-ELECT SEMINAR IN ST. CHARLES, IL, USA



REGISTRATION & TRAVEL FORM • FEBRUARY 11-FEBRUARY 15, 2019

FIRST VICE DISTRICT GOVERNOR/DISTRICT GOVERNOR-ELECT District # _____

First Name/Family (Last) Name _____ Badge/Call Name _____

Mailing Address _____

City _____ State/Province _____ Postal Code _____ Country _____

Home Phone _____ Mobile Phone _____

Email _____ Club # _____ Club Name _____ Membership # _____

The FVDG/DGE Seminar in St. Charles is exclusively for the First Vice District Governor/District Governor-Elect. Companions may not attend.

Q CENTER HOTEL ROOM RESERVATIONS:

LCI will pay for one room, single occupancy with one twin-sized bed at Q Center (location of the training) for the LCI approved dates only.

ARRIVAL: MONDAY, FEBRUARY 11

DEPARTURE: FRIDAY, FEBRUARY 15

Special Requirements: Wheelchair Accessible Other _____

Special Needs in the Hotel Room: _____

(Special Needs Rooms are limited and subject to availability. If applicable, please complete the **Special Needs Form** and return to dgeseminar@lionsclubs.org)

Indicate Dietary Requirements: No restrictions Indian Vegetarian Vegetarian Other _____

TRAVEL INFORMATION

If you will not be flying to St. Charles, IL, USA, please indicate the mode of transportation you will be using instead: Driving Other _____

FIRST VICE DISTRICT GOVERNOR/DISTRICT GOVERNOR-ELECT

Passport Name _____ Passport Number _____ Country of Issue _____ Expiration Date _____

Date of Birth _____ Gender: Male Female

Departure Date* Preferred Departure Time Morning Mid Day Evening Preferred Routing

***LCI approved arrival date is Monday, February 11, 2019**

Return Date* Preferred Return Time Morning Mid Day Evening Preferred Routing

***LCI approved departure date is Friday, February 15, 2019**

Preferred Airport _____ Seating Preference Aisle Center Window

Special Meal Request (If Applicable) _____ Frequent Flyer Program Name(s) _____ Number(s) _____

Wheelchair or Airport Assistance Required** _____ Oxygen Tank Needed in Flight** _____ Traveling with a Companion Dog** _____

****Additional charge considered a personal expense**

EMERGENCY CONTACT INFORMATION:

Emergency Contact Name _____ Emergency Contact Phone Number _____

LCI INTERNAL USE ONLY - TRAVELER TYPE: DGE - ACCOUNT CODE: 3502-5220

Please return the completed form by Monday, October 22, 2018

- Mail: Lions Clubs International Attn: Convention Division - 300 West 22nd Street Oak Brook, IL 60523-8842 USA
- Fax: +1 630.571.1689 • E-mail: dgeseminar@lionsclubs.org

Information provided on this document shall be used in accordance with the privacy policies and procedures of Lions Clubs International.