

# UUP DELEGATE RESPONSE FORM

2010 NYSUT Representative Assembly  
April 29 – MAY 1, 2010  
MARRIOTT WARDMAN PARK  
WASHINGTON, DC

DELEGATES MUST REGISTER ON-LINE OR RETURN THIS FORM BY MAIL OR FAX  
IN ORDER TO BE ELIGIBLE FOR REIMBURSEMENT OF CONVENTION EXPENSES

ON-LINE REGISTRATION OR THIS FORM MUST BE  
RECEIVED IN THE UUP ADMINISTRATIVE OFFICE  
BY 5:00 P.M. ON FRIDAY, FEBRUARY 19, 2010  
(UUP is not responsible for any delays by the United States  
Postal Service or any other private delivery service.)

## DELEGATE STATUS:

- I will serve as a delegate to the 2010 NYSUT Representative Assembly.
- I **WILL NOT** serve as a delegate to the 2010 NYSUT Representative Assembly.

## HOUSING NEEDS:

- I will need housing accommodations and have completed the reverse side of this form with my choice of room, roommate preference, expected arrival and departure dates, and credit card information. Please forward this information on my behalf to NYSUT.
- I **WILL NOT NEED** housing accommodations.
- I **WILL MAKE MY OWN** housing arrangements.

## DELEGATE INFORMATION:

PRINT NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

(over)

PRINT: Last Name, First Name

# UUP DELEGATE HOUSING FORM

2010 NYSUT Representative Assembly  
April 29 – MAY 1, 2010  
Marriott Wardman Park  
Washington, DC

Please forward the following information to the Omni Shoreham on my behalf:

**ROOM PREFERENCE:**

**ROOM RATES:**

All rooms (Single, Twin, Double) are \$244 per night plus 14.5% tax per room per night.

- I prefer to make my own housing arrangements.
- I prefer single accommodations. **I am aware that UUP policy provides for the reimbursement of one-half the cost of a double room.**
- I prefer standard twin accommodations (2 persons, 2 beds).  
I would prefer to room with \_\_\_\_\_
- I prefer standard double accommodations (2 persons, 1 bed). **I am aware that UUP policy provides for the reimbursement of one-half the cost of a double room at the hotel selected for the UUP delegation.**

I will be accompanied by \_\_\_\_\_

**ARRIVAL AND DEPARTURE DATES/TIMES:**

Arrival Date: \_\_\_\_\_ Time: \_\_\_\_\_ Departure Date: \_\_\_\_\_ Time: \_\_\_\_\_

**DELEGATE INFORMATION:**

Name: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

**The following credit card information is necessary to guarantee your reservation:**

Card Type: \_\_\_\_\_ Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

DELEGATE SIGNATURE: \_\_\_\_\_

**SPECIAL ARRANGEMENTS:**

Please indicate below any special arrangements that you may require.

\_\_\_\_\_  
\_\_\_\_\_

(over)

PRINT: Last Name, First Name