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81st Annual Convention

Marriott Hotel/Statehouse Convention Center, June 24-26, 2015

Registration and payment must be received in League office by Monday, June 8, 2015, to qualify for Pre-registration rates.

Pre-registration for municipal officials	0
Registration fee after June 8, 2015 , and on-site registration for municipal officials	5
Pre-registration for guests	5
Registration fee after June 8, 2015 , and on-site registration for guests	0
Other registrants\$20	0

- Registration will be processed ONLY with accompanying payment in full.
 Make checks payable to the Arkansas Municipal League.
- Registration includes meals, activities and a copy of **2015 General Acts Affecting Arkansas Municipalities**.
- No daily registration is available.
- Registration must come through the League office. No telephone registrations will be accepted.
- No refunds after June 8, 2015.
- Cancellation letters must be postmarked by June 8, 2015.
- Marriott guests: In order to avoid a cancellation penalty of one night's room and tax, reservations must be cancelled at least seven (7) days prior to arrival.

Hotel Room Rates

Marriott Hotel(headquarters hotel) tormerly the Peabody H Single/Double. SOLD. 0.UT	otel Check-in 3 p.m.
Capital Hotel Single/Double. SOLD. OUT	Check-in
Doubletree Hotel Single/Double.SOLD. QUT	Check-in
Wyndham Hotel Single/Double. SOLD OUT	Check-in

- Cut-off date for hotel reservations is June 8, 2015.
- Rooms in Little Rock are subject to an 13 percent tax.
- Rooms will be held until 6 p.m. and then released unless guaranteed by credit card.
- Contact the hotel directly to make changes or cancellations in hotel accommodations.
- Hotel confirmation number will come directly from the hotel.
- Please check on cancellation policy for your hotel.

Two ways to register

Regi and

Register online at www.arml.org and pay by credit card.

Complete the steps and **mail with payment** to:
ARKANSAS MUNICIPAL LEAGUE
Attn: 81st Annual Convention
P.O. Box 38
North Little Rock, AR 72115-0038

Step 1: Delegate Inform	nation		
Name:			
Title:	City of:		
Address:	•		
City:S			
Email (required)			
Guests will attend: ☐ Yes ☐ No	Name:		
	Name:		
Step 2: Payment Inform	ation		
• WHAT IS YOUR TOTAL? (see opposi	ite page for fees)		
☐ Pre-registration for Delegate	☐ Pre-registration for Guest	☐ Other Registrants	Pre-registration
<u>\$150</u>	<u>\$75</u>	<u>\$200</u>	Total \$
Regular Registration for Delegate		☐ Other Registrants	Reg. Registration
<u>\$175</u>	<u>\$100</u>	<u>\$200</u>	Total \$
• HOW ARE YOU PAYING? Check Mail payment and form to: Arkans	as Municipal Leggue		
□ Check Mail payment and form to: 81st An P.O. Bo North I □ Credit Card Complete information be Credit Card: □ Visa □ MasterCard Card Number:	Little Rock, AR 72115 low and send to address above. Discover Exp. C	Date: /20	
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