



Sunday, June 8 through Wednesday, June 11

First Name and Last Name:

Nickname:

Organization/Institution:

Organization/Institution Address:

Organization/Institution City, State, Zip:

Work Phone Number:

()

Alternative Phone Number:

()

Is the number listed above a....

Home number

Cell number

Other (please specify) _____

E-mail Address:*

**You must have access to the e-mail address you list during the summer months.*

Do you require special assistance?

No

Yes. If yes, please explain.

Do you require special meal accommodations?

No

Yes. If yes, please explain below.

Are you interested in receiving continuing education credit?

No

Yes

Please return this form along with the \$15 **REFUNDABLE** registration fee to

Tim Hauber
AIB College of Business
2500 Fleur Drive
Des Moines, IA 50321

Please make your check or money order out to Iowa ACAC. Your registration will hold your place on the bus and be returned to you when you arrive for the event on Sunday, June 8. If you cancel your registration your registration fee will be used to pay for your Iowa ACAC membership.