



**“Sweet Home Chicago” - May 25 – 28, 2007
Chaplain’s Registration Form**

Name: _____ Name for Tag: _____
 Address: _____ CAC of: _____
 City: _____ St. _____ Zip: _____ Current Office: _____
 Phone: (____) _____ (____) _____ Male: ___ Female: ___ Delegate: Y ___ N ___
Day Evening
 E-Mail: _____ 1st Convention: Y ___ N ___
 Emergency Contact: _____ Phone: (____) _____

Special Needs: _____

Extra Nights: 5/24: _____ 5/29: _____ Other: _____

Roommate Preference: _____

Smoker? Yes ___ No ___ Roommate Smoker? Yes ___ No ___ Don’t Care ___

A roommate will be assigned if you have selected a double package and a roommate is available.

Veteran? Yes ___ No ___ Branch of Service? _____ Last Rank _____

Veterans will be listed in the regional booklet and will be honored at the Monday Closing Liturgy.

	Chaplain	Extra Night
Package: _____ Single	\$ 375.00	110.00
_____ Double	225.00	55.00
_____ In-Town	100.00	
	In-Town package is for persons who don't need hotel accommodations.	
_____ Extra Nights: _____		

Optional Tours (Include Payment):

Baseball: White Sox vs. Tampa Bay 23.00 _____

Late Fee: _____ 25.00 _____

(Please include Late Fee on Registrations postmarked after April 20, 2007)

Total: _____

Make check payable to **CAC Midwest Regional 2007.**

Transportation: _____ Car _____ Plane _____ Train _____ Other

Arrival Date _____ Time _____ AM/PM Carrier/Flight _____

Departure Date _____ Time _____ AM/PM Carrier/Flight _____

Arriving At _____ O’Hare _____ Midway _____ Union Station _____ Other

Do you need transportation from your arrival location? Yes ___ No ___

Optional Tours/Interests (Check if interested.):

We’ll be carpooling to the Chicago Botanic Garden, Arlington Park, and Brookfield Zoo and to other places if there’s sufficient interest.

Chicago Botanic Garden (Sat) _____ Downtown Museums _____ Riverboat Casinos _____

Arlington Park Racing (Sat) _____ Sports _____ Shopping _____

Brookfield Zoo (Sun) _____ Other (Specify) _____

I’m able to take people in my car on tours _____

In consideration of my authorized attendance and participation in the Spring 2007 CACI Midwest Regional Convention I, intending to be legally bound, do hereby, for myself, my heirs, and executors waive, release, and forever discharge any and all rights and claims which I may have or which may hereafter accrue to me against Catholic Alumni Clubs International, Midwest Region CAC, their vendors and/or subcontractors, and any officer or member of said organization participating in, conducting, or responsible for the conduct of said convention, for any and all injuries suffered by me while traveling to or from this event or participating in this event.

Signature: _____ Date: _____

Signature of Club President: _____

Mail this registration form to

Barb Higgins
5104 Balmoral Ln.
Bloomington MN 55437

Any questions, call 952-888-5773
 E-Mail: beautiggy@att.net