



Alliance for Nuclear Accountability DC Days 2009

Registration Form



****Please replicate this form and use one per registrant****

Please Print Clearly!

CONTACT INFORMATION

NAME _____ ORGANIZATION _____

ADDRESS _____

CITY/STATE/ZIP _____

COUNTY _____ CONGRESSIONAL DISTRICT: _____

PHONE NUMBER (DAY) _____ (CELL) _____

EMAIL ADDRESS _____

SOCIAL SECURITY NUMBER _____

(This is required in order to gain entry to many federal buildings)

DIETARY RESTRICTIONS _____

OTHER UNIQUE NEEDS _____

REGISTRATION FEES

Please make checks payable to Alliance for Nuclear Accountability

I have enclosed:

_____ \$125 for regular registration, if received or postmarked by **March 26, 2009.**

Thereafter, registration is \$150, with no exceptions.

_____ \$50 for student registration

_____ \$10 for Monday's pizza party

_____ Total enclosed

**PLEASE COMPLETE AND RETURN FORM WITH
REGISTRATION FEE BY MARCH 26, 2009 TO:**

ANA DC DAYS

322 4th Street, NE

Washington, DC 20002

Phone: 202-544-0217 x 2502; Fax: 202-544-6143

dpaddock@ananuclear.org

(Please turn over and fill out the reverse.)

REGISTER TODAY!

REGISTER TODAY!

2009 ANA DC DAYS REGISTRATION FORM

Please answer the following questions to help us with our planning.

1. Will you be working with an ANA group to prepare for DC Days (please indicate which group)?

_____ Yes, I am working with _____.

_____ No, I am not working with a group.

2. Have you attended DC Days before?

3. Will you be arranging your own meetings with members of Congress or Administrative offices? Please list the meetings. If not there will be plenty of open meetings for you to attend.

4. Would you like ANA to arrange meetings with your members of congress? If yes, please list the office and person with whom you would like to meet and the reason(s) for the meeting.