



everychild.onevoice.

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**Attendance and Housing Form  
Executive Committee Meeting,  
Office Management Team Meeting,  
Board of Managers Meeting,  
Committee Meetings,**

Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: AZ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Board Position: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

Daytime Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_

**Members of Executive Committee**

I will be attending the Executive Committee Meeting,

**All Board of Managers Members**

I will be attending the Board of Managers Meetings,

**Hotel Room Accommodations**

I will need a hotel room for Friday night.

I will not need a hotel room.

I will need a hotel room for Saturday night.

I will not need a hotel room.

I wish to be assigned a SINGLE room. I understand that I will pay for 1/2 the room cost of \$\_\_\_\_\_, plus taxes and fees which would be approximately 11.6% per night for a regular room. (Please bring check made out to Arizona PTA to the meeting.)

I have a preferred roommate, (name) \_\_\_\_\_

I do not have a preferred roommate. Please assign me a roommate.

I do smoke       I do not smoke

I do care if my roommate smokes

I do not care if my roommate smokes

I **will not** be attending any of the meetings. Attached is a written notice to be given to the President as to why I cannot attend.

**Please email form to [azpta@andiamo-tel.com](mailto:azpta@andiamo-tel.com) or fax response to AZ PTA office 602-279-1814**