



# 2017 Municipal Assessors Institute Registration Form

Lake Lawn Resort, Delavan

September 19-22, 2017

Register by September 12, 2017

Name \_\_\_\_\_ Title \_\_\_\_\_

Street Address \_\_\_\_\_

Municipality \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_

Phone number \_\_\_\_\_ email \_\_\_\_\_

I need arrangements to accommodate a disability or dietary need. We will contact you to make those arrangements.

**Please let us know your plans:**

**Yes      No**

           Bringing a guest? If yes, Guest's Name: \_\_\_\_\_

           Attending the Tuesday reception?

           Attending the Wednesday Banquet?

**WORKSHOP CHOICES:** (choose one from each set of concurrent sessions; session titles on AGENDA)

- |                                   |                                   |                                   |                                   |                                    |
|-----------------------------------|-----------------------------------|-----------------------------------|-----------------------------------|------------------------------------|
| <u><b>Tuesday</b></u>             | <u><b>Wednesday</b></u>           | <u><b>Thursday a.m.</b></u>       | <u><b>Thursday p.m.</b></u>       | <u><b>Friday</b></u>               |
| <input type="checkbox"/> <b>1</b> | <input type="checkbox"/> <b>3</b> | <input type="checkbox"/> <b>5</b> | <input type="checkbox"/> <b>7</b> | <input type="checkbox"/> <b>10</b> |
| <input type="checkbox"/> <b>2</b> | <input type="checkbox"/> <b>4</b> | <input type="checkbox"/> <b>6</b> | <input type="checkbox"/> <b>8</b> |                                    |
|                                   |                                   | <input type="checkbox"/> <b>9</b> |                                   |                                    |

<b>Tuition</b>	Member*	Member*	Non-member	Non-member	Guest**	Total Due***
	Pre-register	On-Site	Pre-register	On-Site		
	<input type="checkbox"/> \$175	<input type="checkbox"/> \$200	<input type="checkbox"/> \$205	<input type="checkbox"/> \$225	<input type="checkbox"/> \$40	_____

**Payment information:**

I am paying by CHECK. (Make check payable to League of Wisconsin Municipalities)

I am paying by Credit Card     Visa     MasterCard

Card Number \_\_\_\_\_

Expiration Date \_\_\_\_\_ Security Code (back of card) \_\_\_\_\_

Signature \_\_\_\_\_

**The Fine Print:**

\*Staff members and elected officials from cities and villages that are currently members of the League and League Business Partners may register as members; WAAO membership is not League membership.

\*\*The Guest fee includes the Tuesday reception and Wednesday banquet. There is no off-site Guest Tour.

\*\*\*Registration fees, minus a \$10 processing fee, are refundable if the League is notified of the cancellation by September 12, 2017. Refunds cannot be issued for cancellations made after close of business September 12, 2017.

**Hotel Information:**

Make reservations with Lake Lawn Resort by calling 800-338-5253.

Identify yourself as attending the Municipal Assessors Institute to receive the block rate of \$113-143 (depending on the room type), plus \$12.00 per night resort fee, plus 13.5% local and state taxes. If tax exempt, a letter/certificate of exemption must be presented. **Reservations must be made with the hotel no later than August 19, 2017.**

72-hour cancellation policy. Check-in is at 4:00 p.m. Check-out is at 11:00 a.m.

<p><b>Register by September 12, 2017</b>  <b>Online at <a href="http://www.lwm-info.org">www.lwm-info.org</a></b>  <b>OR</b>  <b>FAX: 608-267-0645</b>  <b>Questions? Call 608-267-2380</b></p>	<b>OR</b>	<p><b>Mail this form with payment</b>  <b>League of Wisconsin Municipalities</b>  <b>131 West Wilson Street, Suite 505</b>  <b>Madison, WI 53703</b></p>
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