

PLEASE RETURN BY November 3, 2008

**Registration Form
TEXAS RECEPTION
Thursday, November 12, 2009
6:00 - 7:30 p.m.
Grand Hyatt San Antonio, Lone Star Ballroom, Salon A
San Antonio, Texas**

City of _____

Mail tickets to the attention of: _____

Mailing address (reception tickets will be mailed to this address)

Phone # (____) _____ Fax # (____) _____ E-mail _____

Please register the following city officials to attend the Texas Reception. (Use a separate page if necessary or register online at www.tml.org):

Name	Title	Amount \$35/each
Total Amount Enclosed		

The registration fee for the Texas Reception is \$35 per person. Please include payment for all persons planning to attend. No cancellations or refunds will be processed, but substitutions may be made. If paying by check, make payable to Texas Municipal League.

Return to registration form and payment to:

**Karla Vining
Texas Municipal League
1821 Rutherford Lane, Suite 400
Austin, Texas 78754-5128
Fax: 512-231-7490
or register online at www.tml.org**

CREDIT CARD PAYMENTS
 Mastercard Visa Am. Ex. Discover
Cardholder's Name (Please Print)

Acct # _____
Signature _____
Exp. Date _____

FOR OFFICE USE ONLY
Business Check _____ \$ _____
Personal Check _____ \$ _____
Cash _____ \$ _____
Total _____ \$ _____
Date Rec'd _____ Batch No. _____
By _____ ID# _____

