

**REGISTRATION FORM
ACL Research Retreat V**

March 25th – 27th, 2010
Proximity Hotel
704 Green Valley Road
Greensboro, NC 27408

Hosted by
The University of North Carolina at Greensboro, Department of Kinesiology

Date: _____

Name: _____ Title: _____

Company: _____

Address: _____

City, State, & Zip: _____

Phone: _____ Fax: _____ E-mail: _____

Do you plan on submitting an abstract? Y / N

TUITION

	Before Feb 5th, 2010	After Feb 5th, 2010	On-Site
Professional Rate	\$300	\$325	\$350
Student Rate*	\$200	\$225	\$275

*Must include a letter from academic advisor confirming student status

Amount Enclosed: _____

Tuition includes retreat materials, Thursday night reception, all meals on Friday, and breakfast and lunch on Saturday. Saturday evening plans are being finalized.

Cancellation requests received prior to March 1st, 2010 are fully refundable. Cancellation requests received March 1st – March 22nd will receive a 50 percent refund. No refund for cancellations after Mar 22nd, 2010.

Please make your check payable to: UNCG Dept of Kinesiology

Complete this form, enclose your check (sorry we cannot accept credit cards), and mail to:

ACL Research Retreat V
Dept of Kinesiology, 250 HHP
University of North Carolina at Greensboro
1408 Walker Ave
Greensboro, NC 27412

HOTEL RESERVATIONS: Rooms at the Proximity Hotel (<http://www.proximityhotel.com>) are being held @ \$139 Single or 149 Double/night + tax, **if booked prior to February 23, 2010**. Call (336) 379-8200 or 800-379-8200 and tell them you are with the UNCG Department of Kinesiology to get this special rate. Please inform us of any special dietary needs.

For questions regarding registration, please call **Sandy Shultz** at 336-334-3027, or e-mail: sjshultz@uncg.edu.

Please visit <http://www.uncg.edu/ess/anrl/acletreatv.html> for up to date conference information and instructions for abstract submissions.