



**SOUTH WEST TRANSIT  
ASSOCIATION**



SWTA Phone: 512-291-8870  
P.O. Box 153157 Fax:  
Austin, TX 78715 www.swta.org

Hosted by



**SWTA Transit Marketing Seminar  
Oklahoma City, Oklahoma September 7-9, 2008  
Attendee Registration Form**

<p><b>Attendee Information:</b></p> <p>Name: _____</p> <p>Nickname: _____</p> <p>Title: _____</p> <p>Agency: _____</p> <p>Address: _____</p> <p>City: _____ State: _____ Zip: _____</p> <p>Phone:(_____) _____ Fax:(_____) _____</p> <p>E-mail (optional): _____</p> <p>SWTA occasionally takes photographs and videos at its events to be used to promote the association and it's activities. Please initial below if you do NOT wish to have any photos of yourself used in this way. _____</p> <p><input type="checkbox"/> Spouse/guest will attend. Name (for badge): _____</p>	<p><b>Function Attendance:</b></p> <p>Please indicate which of the following functions you plan to attend:</p> <p><b>Sunday:</b></p> <p><input type="checkbox"/> Reception 5:00 - 6:00 p.m.</p> <p><b>Monday:</b></p> <p><input type="checkbox"/> Breakfast</p> <p><input type="checkbox"/> Spotlight Awards Luncheon</p> <p><input type="checkbox"/> Dinner &amp; Entertainment (off hotel property)</p> <p><b>Tuesday:</b></p> <p><input type="checkbox"/> Breakfast</p> <p>Special dietary requests: ___ Vegetarian</p> <p>Other: _____</p> <p><i>Spouse/guest tickets for individual events available. Please call SWTA for details.</i></p>
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Online registration available at [www.swta.org](http://www.swta.org) and includes credit/debit cards, checks or PO's.

<p><b>Registration Fees:</b></p> <p>You get a prize if you register before August 15, 2008!</p> <p><input type="checkbox"/> SWTA Members \$275</p> <p><input type="checkbox"/> Non Members \$325</p> <p><input type="checkbox"/> Attending Spouse \$75 (includes meals &amp; social events)</p> <p>Registration fee includes all social events, meals and the</p>	<p><b>Payment Information:</b></p> <p><b>Check one:</b> ___ Total Enclosed ___ Will Mail ___ Credit Card</p> <p>\$ _____ (Make checks payable to South West Transit Association)</p> <p>Master Card ___ Visa ___ Discover ___ American Express ___</p> <p>Name on credit card: _____</p> <p>Billing address for card (required): _____</p> <p>_____</p> <p>Card No: _____ Exp. Date _____</p> <p>Signature: _____</p>
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Please mail registration form to: SWTA, PO Box 153157, Austin, TX 78715

**Cancellations:** If you need to cancel a registration, you must do so by August 15, 2008. No refunds will be given after that date. No-shows will be billed.