

**REGISTRATION**

ANNUAL BUSINESS MEETING

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**First Name**


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**Last Name**

Active Member  
 Register by May 15<sup>th</sup>  
 Will be eligible for the  
 Early Bird Drawing!!

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**Jurisdiction/Organization/Company**

 First time attending Annual Business Meeting:  Yes or  No

 Check Only One: **(Dual members only check one)**  IABO Member  FIAI Member  
 Indiana Licensed Home Inspector  Non – Member

Please check if you are any of the following for IABO or FIAI

 Board of Director  Committee Chairman  Committee Member  Past President

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**Street Address**
**Suite/Room**


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**City**


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**State**


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**Zip**


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**Phone**


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**Fax**
**Full Registration**

Member Rate (IABO/FIAI) \$390.00 Non-Member Rate \$430.00 \$ \_\_\_\_\_

**One Day Registration-check day(s)**

One day registration \$185.00 (includes lunch for day registered-exclude Sunday lunch) \$ \_\_\_\_\_

 Sat. July 19, 2008  Sun. July 20, 2008  Mon. July 21, 2008  Tue. July 22, 2008  Wed. July 23, 2008

If after July 1, 2008 add \$50.00 \$ \_\_\_\_\_

 State Reimbursement \$ Amount to be determined - \$ \_\_\_\_\_

Total \$ \_\_\_\_\_

**HOTEL RESERVATIONS**
 University Plaza Hotel, 3001 Northwestern Ave, West Lafayette, Indiana 47906, Phone: (765)463-5511  
 Rooms are \$85.00 for 1 & \$91.00 for 2 a night plus applicable taxes. Cost includes a breakfast buffet for  
 up to two persons. Hotel reservations are to be made through the hotel. When making hotel reservations  
 refer to IABO/FIAI-ABM

**ATTN ACTIVE MEMBERS- Do not prepay!! We will invoice you after the ABM. All registration fees are payable to IABO.**

 To Register Fax or Mail to: Indiana Association of Building Officials Inc.  
 250 Franklin Street, Columbus, IN 47201 Phone: (812)526-3738 Fax: (812)378-1890

# GUEST BADGE

ANNUAL BUSINESS MEETING

ANYONE planning on attending ANY function at the IABO/FIAI Annual Business Meeting will need to be registered and have a name badge. This includes members, spouses, children and special guest. Please complete one form per person. You MUST have a badge to attend all events including meals. If you would like to purchase meals, please complete the next section "Guest Meals".

Please print or type.

\_\_\_\_\_
Full Name

\_\_\_\_\_
Person Attending With or Reason for Attending

\_\_\_\_\_
Jurisdiction/Organization/Company – If any

\_\_\_\_\_
Street Address Suite/Room

\_\_\_\_\_
City State Zip

\_\_\_\_\_
Phone Fax

Children Attending:

\_\_\_\_\_
Full Name Age

\_\_\_\_\_
Full Name Age

\_\_\_\_\_
Full Name Age

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**GUEST MEALS**

ANNUAL BUSINESS MEETING

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 Full Name

Please complete one form for each guest.

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 Person Attending With or Reason for Attending

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 Jurisdiction/Organization/Company – If any

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 Street Address

Suite/Room

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 City

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 State

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 Zip

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 Phone

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 Fax
**MEAL PACKAGE**

Meal package includes all meals \$128.49

\$ \_\_\_\_\_

**INDIVIDUAL MEALS**

- Presidents Welcome Dinner \$ 23.71  
 Sunday Evening Dinner \$ 23.71  
 Monday Lunch \$ 14.95  
 Monday Evening Dinner \$ 23.71  
 Tuesday Lunch \$ 12.45  
 Tuesday Banquet \$ 29.96

Total Ala Carte Meals

\$ \_\_\_\_\_

Reduced rate for Children:

 Children (17 & under) 1/2 Price \$64.25

Minus Child Discount

-\$ \_\_\_\_\_

Total

\$ \_\_\_\_\_

Please make checks payable to the Indiana Association of Building Officials, Inc.

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