

<input type="checkbox"/> U-shape table <input type="checkbox"/> Hollow square <input type="checkbox"/> Reception (small cocktail tables, no chairs) <input type="checkbox"/> Banquet rounds * Attach diagram if special set-up is requested.	<input type="checkbox"/> Tape recorder <input type="checkbox"/> Microphones (specify type and number) _____ <input type="checkbox"/> VCR (specify one type) _____ <input type="checkbox"/> Monitor <input type="checkbox"/> Technician <input type="checkbox"/> Other _____ * Laptop not included; specify if one is needed _____
FOOD and BEVERAGE (please describe items desired and approximate budget. Hotel menus will be forwarded.)	
<input type="checkbox"/> Breakfast <input type="checkbox"/> Lunch <input type="checkbox"/> Dinner	<input type="checkbox"/> Mid-morning coffee/tea break <input type="checkbox"/> Afternoon coffee/tea break <input type="checkbox"/> Reception
<i>PLEASE NOTE: The final guaranteed attendance must be submitted to the hotel at least fourteen (14) business days before the event begins and is not subject to reduction for both menu items and beverage service.</i>	
PAYMENT (must be completed before meeting space will be assigned) Payment will be made by:	
<input type="checkbox"/> Advance Payment by bank wire transfer.	
<input type="checkbox"/> Credit Card [Type: _____]	
Cardholder Name: _____	
Expiration Date (DD/MM/YYYY): ____/____/____	

Please attach information that may be useful such as an agenda, program description or budget considerations.

Return this form to:
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