



REGISTRATION AND HOUSING FORM

All registrations must be submitted by Monday, 14 October.

Contact ri.registration@rotary.org with questions.

Two ways to register:

1. Register online and receive an immediate confirmation (district governor-elect and partner registration only) my.rotary.org/en/exchange-ideas/events/international-assembly
2. Email your form to ri.registration@rotary.org (if not including payment information) or fax your form to +1-847-556-2194. A confirmation of your registration will be emailed to you.

PARTICIPANT INFORMATION

Complete the fields exactly as you would like your name badge to appear. The information provided by district governors-elect should reflect the same information provided on nominee data forms.

FAMILY NAME	FIRST NAME AND MIDDLE INITIAL
BADGE/CALL NAME (Example: Jenny, if full name is Jennifer Smith)	CLASSIFICATION/FORMER CLASSIFICATION
DISTRICT	EMAIL

Is your partner attending? Yes No If yes, fill in the information in shaded box below.

Please note the specific badge requirements for Rotarian and non-Rotarian partners.

FAMILY NAME	FIRST NAME AND MIDDLE INITIAL	BADGE/CALL NAME
CLASSIFICATION/FORMER CLASSIFICATION (Rotarians only)		DISTRICT
ROTARY CLUB (Rotarians) OR CITY OF RESIDENCE (Non-Rotarians) AND STATE/PROVINCE		COUNTRY

Partner Language Preference

For written materials received at the International Assembly:

- English
 French
 Italian
 Japanese
 Korean
 Portuguese
 Spanish

For participating in discussions at the International Assembly:

- Chinese
 English
 French
 German
 Hindi
 Italian
 Japanese
- Korean
 Portuguese
 Spanish
 Swedish

Child registration: To register and pay for children and caretakers to attend general sessions and/or banqueted events, please contact ri.registration@rotary.org.

EMERGENCY CONTACT INFORMATION (REQUIRED)

In case of an emergency during the meeting, contact:

NAME	PHONE (Include country and city codes)
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MEALS

All district governors-elect, funded partners, official paid participants, and training leaders are required to participate in the meal plan. Credit cannot be given for meals not taken by any participant. RI-funded speakers have the option of participating in the meal plan.

If you are a speaker, please indicate your participation. Yes No

Please indicate the special dietary need for you and your partner by checking from the list below:

	Diabetic	Gluten-free	Halal	Vegetarian	Vegan	No red meat	No fish	No shellfish
Self	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Partner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

PLEASE NOTE: Pork is NOT served at any meal function.

Specify any life-threatening food allergies: _____

SPECIAL NEEDS

So RI can properly prepare for your time at the assembly, please indicate any medical conditions or requests that RI should be aware of, and any special arrangements to be made to accommodate your needs. Please check all that apply:

- | | |
|---|---|
| <input type="checkbox"/> Sleeping room with a roll-in shower | <input type="checkbox"/> Literature printed in Braille |
| <input type="checkbox"/> Sleeping room bathtub with a portable bench and grab rails | <input type="checkbox"/> I have vision/hearing impairments and need to be seated near the front of the room for training sessions |
| <input type="checkbox"/> Sleeping room with grab rails in the shower/tub and around the toilet | <input type="checkbox"/> I require an assisted listening device |
| <input type="checkbox"/> Sleeping room with a phone for deaf/hard of hearing and a visual alarm | <input type="checkbox"/> I require a wheelchair/scooter |
| <input type="checkbox"/> Other: _____ | <input type="checkbox"/> I am bringing my own wheelchair/scooter |

HOTEL

Each district governor-elect, official paid participant, training leader, and RI-funded speaker will have a standard room reserved at the Manchester Grand Hyatt San Diego. Please indicate your bed type:

- One Bed Two Beds

Arrival: Sunday, 19 January

Departure: Saturday, 25 January

Rotary International Travel Service will confirm your stay secured by RI's housing department and your approved length of stay.

To secure additional nights at personal expense, please visit Manchester Grand Hyatt at <https://book.passkey.com/go/RotaryIA2020>.

PHONE CARDS

Phone cards will only be distributed to district governors-elect and training leaders upon request. Indicate below if you will need a phone card.

- I require a phone card.

PHOTOGRAPHY RELEASE

By attending, participating in, or visiting the Rotary International Assembly you consent to be photographed or recorded by any means, including still photography, audio, interview, and video recording. Rotary uses this information on its website, in its print and electronic publications, and in social media to promote Rotary. Rotary retains this information for historical and research purposes. You grant Rotary, free of charge, an irrevocable right to use, copy, display, modify, distribute, publish, and license use of these recordings and your image and voice for official Rotary business in connection with the assembly.

PERSONAL INFORMATION SHARING

Your privacy is important to Rotary and the personal data you share with Rotary will only be used for official Rotary business. This means that your personal data will be used to enable your attendance during the assembly and to facilitate your assembly experience (for example, we may share your personal data to print name badges). Personal data you provide when registering for the assembly may be transferred to Rotary service providers (for example, affiliated entities) to assist Rotary in planning assembly-related activities. You may receive information about the assembly and supplementary services via email. You may object to the use of your email address at any time by sending a message to ri.registration@rotary.org. See rotary.org/privacy.

SIGNATURE

By submitting this registration form, I consent and verify that I have read and I agree to the notices and to the use of my data in this form for the purposes of the realization of the assembly as described in the General Information section under Notices.

SIGNATURE (Electronic submission of this form constitutes a signature)

DATE