

**UNITED STATES AQUATIC SPORTS  
CONVENTION XXVI  
JOSEPH S. KOURY CONVENTION CENTER  
GREENSBORO, NC  
SEPTEMBER 11-18, 2005**

**GENERAL INFORMATION**

**REGISTRATION:** All persons attending any meetings at the convention must be registered.

Registration fees are:

**\$110.00** postmarked by August 6, 2005

**\$135.00** postmarked on or after August 7, 2005

Please send your registration form and fee to: Bob & Helen Brown, United States Aquatic Sports  
16700 Indigo Road  
Lakeville, MN 55044-5613

Make your checks payable to: **United States Aquatic Sports, Inc.**

If you need to cancel, you must do so **in writing** by August 31, 2005.

**HOTEL RESERVATIONS:** Reservations will be handled through the Sheraton Greensboro Hotel at Four Seasons by returning the enclosed reservation form to the hotel or by calling the hotel at: **800-242-6556 or 336-292-9161**. If changes need to be made concerning your reservations you **MUST** call the hotel directly. See the reservation form for detailed information, including rates.

For online reservations go to: <http://www.sheratongreensboro.com> Scroll down to bottom of page to group reservation. **Group code USI09K**

**IF YOU ARE IN NEED OF A HANDICAPPED ROOM, PLEASE INDICATE THAT WHEN MAKING YOUR RESERVATIONS.**

**HOTEL GUESTS NOT REGISTERED FOR THE UNITED STATES AQUATIC SPORTS CONVENTION WILL BE CHARGED THE SHERATON GREENSBORO HOTEL AT FOUR SEASONS STANDARD ROOM RATE.**

**You may register (as a convention delegate) without making room reservations at the Sheraton Greensboro Hotel At Four Seasons.**

**FOR ANY ADDITIONAL INFORMATION, CALL:**

**SYNCHRO SWIMMING USA- 317-237-5700**

**ELLAINE COX, CONVENTION COORDINATOR-574-272-0572**

**IF YOU NEED ADDITIONAL REGISTRATION FORMS OR INFORMATION YOU MAY CHECK WEBSITES: [www.usaquatic.org](http://www.usaquatic.org) or [www.usasynchro.org](http://www.usasynchro.org).**

**UNITED STATES AQUATIC SPORTS  
CONVENTION XXVI-REGISTRATION  
SHERATON GREENSBORO HOTEL AT FOUR SEASONS  
GREENSBORO, NC  
SEPTEMBER 11-18, 2005**

**DELEGATE REGISTRATION FORM**

**PLEASE PRINT OR TYPE**

NAME \_\_\_\_\_ NAME OR YOUR  
LSC/LDC/LMSC/LSSC \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

TELEPHONE NUMBER & AREA CODE (home) \_\_\_\_\_ (office) \_\_\_\_\_

FAX NUMBER \_\_\_\_\_ E-MAIL \_\_\_\_\_

FIRST NAME OR NICKNAME FOR BADGE \_\_\_\_\_

SPORT (CIRCLE)      USA-S              USD              USSS              USMS              USAWP

REGISTRATION FEE: Postmarked by August 6, 2005 (early bird).....\$110.00

Postmarked by August 7, 2005 or later..... \$135.00

**YOU MUST REGISTER TO ATTEND ANY OF THE MEETINGS OR TO BE  
ELIGIBLE FOR THE SPECIAL CONVENTION ROOM RATE.**

This registration form must be accompanied by:

- 1) Your check or money order for the appropriate registration fee (\$110.00 or \$135.00)  
Made payable to **UNITED STATES AQUATIC SPORTS (USAS)**.
- 2) You are responsible for making your hotel reservations directly with the Sheraton Greensboro Hotel At Four Seasons, by means of the provided reservations form. All reservations and reservations changes must be made by you with the hotel by calling the Sheraton Greensboro Hotel at Four Seasons at: 800-242-6556 or 336-292-9161 or fax your reservation form to: 336-323-4876 or by going on line and registering at: <http://www.sheratongreensboro.com>  
**Scroll down to bottom of page where you will be asked for group code: USI09K**

**REGISTRATION REFUND POLICY:** Full refund of your registration fee will be made upon receipt of a **written** request that must be received by **August 31, 2005**.

SEND THIS FORM WITH YOUR REGISTRATION FEE TO:

**BOB & HELEN BROWN, UNITED STATES AQUATIC SPORTS, INC.  
16700 INDIGO ROAD  
LAKEVILLE, MN 55044-5613**

**DO NOT MAIL ANYTHING TO THE ABOVE ADDRESS AFTER SEPTEMBER 3, 2005**

Hand carry the forms and register at the Convention Registration Desk.

**Please note that all on site registrations must be paid for by cash or a check.**

**OFFICIAL HOTEL RESERVATION FORM**  
**UNITED STATES AQUATIC SPORTS CONVENTION**  
**SHERATON GREENSBORO HOTEL AT FOUR SEASONS**  
**GREENSBORO, NC**  
**SEPTEMBER 11-18, 2005**

**RESERVATION CUT OFF DATE: August 17, 2005**

Please print clearly. Any housing form that is not filled out in its entirety will not be processed.

FIRST NAME \_\_\_\_\_ LAST NAME \_\_\_\_\_

STREET \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE (\_\_\_\_\_) \_\_\_\_\_ FAX (\_\_\_\_\_) \_\_\_\_\_

ARRIVAL DATE \_\_\_\_\_

CANCELLATIONS/CHANGES

DEPARTURE DATE \_\_\_\_\_

All cancellations and changes should be sent or phoned directly to the hotel. Cancellations must be made 48 hours prior to arrival to guarantee refund of deposit.

ROOM OCCUPANTS/LIST ALL

1. \_\_\_\_\_

CONVENTION HOTEL RATES PLUS

2. \_\_\_\_\_

7 % Sales Tax & 6% Occupancy Tax

Single-Double-Triple-Quad

\$122.00

3. \_\_\_\_\_

4. \_\_\_\_\_

PLEASE MAKE YOUR RESERVATIONS DIRECTLY WITH THE SHERATON GREENSBORO HOTEL AT FOUR SEASONS

800-242-6556 or 336-292-9161

Fax: 336-323-4876

E-mail: [www.sheratongreensbor.com](http://www.sheratongreensbor.com)

Scroll to group reservations. Code USI09K

ACCOMODATIONS  
\_\_\_Single \_\_\_Double \_\_\_Triple \_\_\_ Quad

**TO RECEIVE THE CONVENTION RATE BE SURE TO MENTION THAT YOU ARE WITH UNITED STATES AQUATIC SPORTS**

**Should you have a disability or have any special needs or requirements, please let the hotel know.**

Hotel reservations will be on a first COME basis. **HOUSING WILL BE CUT OFF ON 8/17/05**  
Or when we reach capacity.

Room requests must be submitted on this form via mail or phone to the hotel directly.

Mail to:

**Sheraton Greensboro Hotel at Four Season 3121 High Point Rd Greensboro, NC 27407**

Discounted rates have been negotiated with the hotel. The hotel requires a one-night's lodging deposit to guarantee your reservation. Your reservation must be guaranteed by credit card.

\_\_\_ American Express \_\_\_ Master Card \_\_\_ Visa \_\_\_ Diners Club \_\_\_ Other \_\_\_\_\_

Credit Card Number \_\_\_\_\_ Expiration Date \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Cardholder's Name (please print clearly) \_\_\_\_\_