

Name of Event: Date of Event: Lodging Type: Return by: SHARP Annual Conference July 14 - 19, 2019 North Apartments July 8, 2019

Participant Name:

I,	, authorize UM	lass Conference Services to charge
my	card,	, with
expiration date	, in the event of any	residence hall damages, unreturned
room key(s) and/or u	unreturned access card(s). I understan	nd that \$50.00 will be charged for each
lost/damaged key an	d \$20.00 will be charged for each log	st/damaged access card. The billing
address for this card	is	
The 3-digit security	on the back of the card (or on the fro	ont of the card for American Express)
is:		

Signature of Card Holder

Print Name

Date

This form may be returned by fax or mail, or you can call the UMass Registration Office to complete it by phone. Do not return this form by email.

> *Phone:* 413-577-8102 *Fax:* 413-577-8130 *Mail:* Conference Services/SHARP, 810 Campus Center, 1 Campus Center Way, University of Massachusetts, Amherst MA 01003