

Area Assembly Bid Form
CNIA General Service Committee

We have reviewed the CNIA Assembly Guidelines and respectfully submit this bid for the following assemblies (select all that apply):

YEAR: _____	ASSEMBLY DATES:
<input type="checkbox"/> WINTER	
<input type="checkbox"/> PRECONFERENCE	
<input type="checkbox"/> POSTCONFERENCE	
<input type="checkbox"/> FALL	

Submitted by:

District #: _____ DCM or GSR Name: _____
Email: _____ Phone: _____
Mailing Address: _____
Additional Contact: _____ Phone: _____

Facility information (provide as much information upfront as possible):

Venue Name: _____ City: _____
Physical Address: _____
Square Footage: _____ ADA Compliant: Yes No Unk.
Accessible Parking: Yes No Unk. Wi-Fi Available: Yes No Unk.
Cost per day: _____ Lodging Available: Yes No Unk.

Additional Information/Comments:
