

**Office of the Tenant Advocate**  
**2013 TENANT SUMMIT REGISTRATION**

Today's date: \_\_\_\_\_

**EVENT INFO**

The Office of the Tenant Advocate's Sixth Annual Tenant & Tenant Association Summit will be held on Saturday, **September 28, 2013** at **Kellogg Conference Center** located at Gallaudet University from 8:00am to 5:00pm. The OTA Tenant Summit serves as a day-long forum each year to bring together tenants, tenant associations, housing attorneys and advocates, policy experts, community leaders, and District officials to discuss matters of concern to the District's tenant community. Registration, lunch, and parking are all free.

(Please Print)

**REGISTRANT INFORMATION**

Registration Type: ☐ Tenant ☐ Tenant Association ☐ Exhibitor

Name: \_\_\_\_\_ Ward: \_\_\_\_\_

Address: \_\_\_\_\_ Unit #: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone #: \_\_\_\_\_ Email Address (please print): \_\_\_\_\_

Do you require language or sign language interpretation? ☐ Yes ☐ No (OTA must be notified 5 working days prior to event)

If Yes, please check: ☐ English ☐ Spanish ☐ French ☐ Chinese ☐ Korean ☐ Vietnamese ☐ Amharic ☐ Sign Language  
☐ Other \_\_\_\_\_



Do you have special needs?: ☐ Yes ☐ No If yes, please specify: \_\_\_\_\_

**BUILDING INFORMATION (COMPLETED BY TENANT ASSOCIATIONS ONLY)**

Name of Apt Building: \_\_\_\_\_

Tenant Association Name: \_\_\_\_\_

**Tenant Association Contact Information**

Contact Name: \_\_\_\_\_ Contact Phone #: \_\_\_\_\_ Contact Email Address: \_\_\_\_\_

**EXHIBITOR INFORMATION (SKIP THIS SECTION IF NOT EXHIBITOR)**

Note to Exhibitor—The agency will review the completed application for compliance with District government standards, and will notify the applicant of approval or disapproval within two (2) weeks of its submission. Neither approval of the application, nor status as event exhibitor, constitutes agency endorsement of any product or service.

☐ For Profit ☐ Not for Profit ☐ Government Agency

Company/Organization: \_\_\_\_\_

Job Title: \_\_\_\_\_ Work Phone #: \_\_\_\_\_

Please describe the information/services/products your organization will present:



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Washington, DC 20009  
(202) 719 – 6560 (phone)  
(202) 719 – 6586 (fax)

