



The 54th ANNUAL HAWAII CONVENTION

“Our Whole Attitude And Outlook Upon Life Will Change”

October 29th – November 1st, 2015

Online Registration & Information: www.annualhawaiiiconvention.com

REGISTRATION FORM

You must be registered to attend
No refunds after September 29th, 2015

Hilton Hawaiian Village:

Single/Double Occupancy at:
\$189+\$15 Resort Fee & Taxes
(800) HILTONS (USA & Canada)
(808) 949-4321 (Local)

Mail to: Annual Hawai'i Convention P. O.
Box 23434, Honolulu 96823

Hotel Reservations Accepted Starting Nov. 13th – Use Discount Code “AWC”

The Annual Hawai'i Convention attendees agree to release the Convention Committee and the individual members for any and all causes of action, debts, dues, claims and demands of whatever nature that may transpire from any activity arising during the convention.

Payment for meals must be postmarked by October 7th, 2015.

Mail Confirmation To:

Name (First/Last): _____ Phone: () _____
Address: _____ Country: _____
City: _____ State: _____ Zip Code: _____ Email: _____

Badge Name: _____

☐ AA ☐ AI Anon ☐ Paid Guest

Badge Name: _____

☐ AA ☐ AI Anon ☐ Paid Guest

Registration Fees:

Postmarked by September 29, 2015..... \$64.00
Postmarked after September 29, 2015..... \$74.00
Children 12 and under..... \$5.00

Meals: ☐ Check box to request vegetarian meals

“ALOHA FRIDAY” Sunset Buffet..... \$69.00
Saturday Night “MASQUERADE BALL”..... \$62.00
Serenity Sunday Breakfast..... \$50.00
Saturday AI -Anon Brunch \$52.00

Souvenirs:

Coffee Mugs..... \$10.00
Travel Coffee Mugs..... \$15.00

T-Shirt S _ M _ L _ XL _ XXL _ \$17.00
XXXL _ XXXXL _ \$21.00

Tank Top S _ M _ L _ XL _ XXL _ \$17.00
XXXL _ \$21.00

Long Sleeve S _ M _ L _ XL _ XXL _ \$21.00
XXXL _ \$26.00

Women's S _ M _ L _ XL _ XXL _ \$17.00

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XXXL _ \$26.00

Women's S _ M _ L _ XL _ XXL _ \$17.00

TOTAL = _____

Scholarship Fund Contribution

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TOTAL = _____

Scholarship Fund Contribution TOTAL = _____

☐ Cash ☐ Check*** ☐ Visa ☐ MasterCard ☐ Money Order

Credit Card No. _____

Exp Date: _____

Cardholder: _____

GRAND TOTAL:

Cardholder Phone: _____

Cardholder Signature: _____

Emergency contact: Name: _____ Phone: _____

CAN YOU ASSIST?

Available to Speak ☐

Available to Chair a Meeting ☐

Available for Service ☐

***MAKE CHECKS PAYABLE TO ANNUAL HAWAII CONVENTION

CCMLPNY