REGISTRATION FORM

(Please photocopy and distribute as needed to new members and returning members with new addresses)

- Registration Fee is $75.00 per member, if received on or before May 15th, 2019
  Late Registration and Door Registration Fee is $100.00. There is no charge for children under 3 years old.

- Hotel Reservations
  In addition to completing this form, you are responsible for making your own hotel reservations.
  Discounted rate of $89.00 per night/room (plus tax) are only guaranteed until May 30th.
  Hotel Cancellation Policy is by 6 pm on June 15th, 2019. Reservations can be made using the following link. Please only book rooms that are needed. [https://www.marriott.com/events/start.mi?id=1541172766602&key=GRP](https://www.marriott.com/events/start.mi?id=1541172766602&key=GRP)

Hotel Information: Four Points by Sheraton St. Louis–Fairview Hts., 319 Fountains Pkwy Fairview Heights, IL 62208
Tel: 618-622-4459

MEMBER’S INFORMATION:
For our address book (please select one box below):

ADDRESS: ________________________________________
CITY: _____________ STATE: _______ZIP: _____________
PHONE NUMBER: ___________________________________
EMAIL: ___________________________________________

Registration and Address Box Details (Must beFilled Out):

<table>
<thead>
<tr>
<th>Attending Convention?</th>
<th>First Name Only</th>
<th>Father’s Name And Nukh</th>
<th>Mother’s Name And Nukh</th>
<th>Gham In India</th>
<th>Child's year Of Birth</th>
<th>Check if under 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes or No</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

- **Registration Fee**: Number of Members attending over the age of 3: _____ x $75.00= $________
- **Compliments pledged at April 6th Meeting**: ........................................ = $________
- **Optional Compliments** ................................................................. = $________
  □ Full Page (Color) - $1,000    □ Full Page (B/W) - $550    □ Half Page (B/W) - $350

Email compliment to Bhavin Chhabhaiya at BhavinGPatel@gmail.com by May 15th or have him design it for you by checking this box: □ I give permission to KKPS USA to design the compliments page.

Make Check payable to **KUTCH KADVA PATIDAR SAMAJ, USA** TOTAL AMOUNT ENCLOSED = $________

PLEASE MAIL YOUR COMPLETED REGISTRATION FORM AND FEES BEFORE MAY 15th, 2019 TO:

Usha Kishor Patel,
209 Cashmere Court,
Cranberry Twp., PA 16066