

# REGISTRATION FORM

**PHCC-WEST 2015**  
The Power of Change

Westin Maui Hotel & Spa • Maui, HI

## ATTENDEE INFORMATION

Company Name		
Street Address		State Zip
Registrant 1	Badge Name	
Phone	Fax	
Attendee E-Mail Address (Required for confirmations & updates)		
Registrant 2	Registrant 3	
Registrant 4	Registrant 5	
State PHCC Association	Local PHCC Association	First PHCC Convention YES NO



**May**  
**13-16**  
**2015**



	QTY	By April 1st	After April 1	
Full Members, Employees Registrant		\$495	\$595	\$
Sponsors, Industry Affiliates		\$495	\$595	\$
Spouses/Social Guests		\$395	\$445	\$
Non-Member Contractors		\$595	\$695	\$
Executive Directors		\$350	\$450	\$
Day Pass* Date(s): _____		\$200	\$300	\$
Installation Dinner only**		\$125	\$175	\$
Children Ages 3-9 (0-2 Free)		\$150	\$200	\$

### Optional Events

Golf Tournament		\$TBA	\$TBA	\$
Check Back for Amazing Events!		\$TBA	\$TBA	\$
			<b>TOTAL:</b>	\$

\*All events that day \*\*Per meal event price

## PAYMENT INFORMATION

Check# \_\_\_\_\_  AMEX  Discover  MC  Visa

Card Number	Expire Date
Name on Card	Billing Zip Code
Signature	Amount Authorized \$

**REGISTER**  
**BY**  
**APRIL 1**

**SAVE**  
**\$100**

### Cancellations:

Must be received in writing by April 15, 2015 for refund. After April 15, 2015, a 50% processing fee will be charged. Refunds will be mailed post convention.

**On-Site Registration** will be assessed a \$30 handling/late fee.

**Registration Deadline - April 15, 2015**

**REMT PAYMENT & FORM TO:** 1820 Tribute Road, Suite A, Sacramento, CA 95815

**E-MAIL:** t.perez@phccgsa.org or **FAX:** 916-640-0905