

30th Pentecostal Conference of North American Keralites

1 Summers Lane, Hamilton, Ontario, Canada L8P 4Y2, July 5th-8th, 2012. WWW.PCNAK.COM

National Convener
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IF YOU WOULD LIKE TO BE A SPONSOR, PLEASE USE THE SPONSORSHIP FORM (ON REVERSE SIDE)

PRIMARY REGISTRANT	OTHER REGISTRANT(S)
<p> <input type="radio"/> Rev. <input type="radio"/> Dr. <input type="radio"/> Mr. <input type="radio"/> Mrs. <input type="radio"/> Ms. Name: _____ Address: _____ City: _____ State/Prov.: _____ Zip: _____ Email: _____ Phone: _____ </p>	<p> ADULTS M/F _____ _____ _____ _____ _____ CHILDREN (AGES 4 to 12) _____ _____ _____ _____ </p>
<p> U.S. Mail Accepted until June 25th 2012 MAILING ADDRESS (USA): 30th PCNAK ← 1639 Skyview Drive Irving, TX 75060-4711 </p>	<p> MAILING ADDRESS (CANADA): 30th PCNAK 329 Goldhawk Trail, Scarborough ONTARIO, CANADA M1V 4H2 </p>
<p>Please make checks payable to: 30th PCNAK</p>	

ACCOMMODATION & MEALS: <u>All ages as of 07/05/2012</u>	Rates Effective Until March 31st, 2012			3 DAYS: THU SUN 2 DAYS: FRI SUN; 1 DAY: SAT SUN	
Meals are Optional	3 DAYS	2 DAYS	1 DAY	# OF PEOPLE	TOTAL AMOUNT
TRADITIONAL GUEST ROOM	\$297	\$198	\$99		\$
FOOD ADULT (Ages 13 & Up)	\$135	\$90	\$45	X	\$
FOOD CHILDREN (Ages 4-12)	\$90	\$60	\$30	X	\$
FOOD CHILDREN (Ages 0-3)	FREE			X	\$
REGISTRATION FEE (Ages 4 & Up)	\$20			X	\$
<i>Rates are for accommodation and meals from July 5th (Thursday) evening through July 8th (Sunday) afternoon based on a 24 hour stay with 3 meals per day. A maximum of 4 people per room including children. Room assignments are on a first-come first-serve basis. AFTER 31st MARCH: Registration \$25, Room \$109/day, Food \$55/day (Adults), and \$40/day (Children 4-12).</i>					
					Additional Contribution: \$
					Min. Advance Payment (\$300): \$
					Balance DUE: \$

PAYMENT METHOD (SELECT ONE): CASH CHECK CREDIT CARD **(3% fee will be added for Credit Card transactions).**
NAME ON CREDIT CARD: _____ **CARD #** _____
EXPIRY DATE: _____ **SECURITY CODE:** _____ **TYPE OF CARD:** VISA/MC/AMEX.

TRAVEL INFORMATON: (FILL IF YOU NEED A RIDE FROM THE AIRPORT). **AIRPORT:** BUFFALO/ TORONTO/ HAMILTON

FLIGHT #: _____ ARRIVAL DATE & TIME: _____ # OF PEOPLE: _____

CERTIFICATION: I, as an attendee of the 30th PCNAK, acknowledge and accept the full responsibility of safety, liability, and medical insurance for myself and my family in case of any emergency, and will not hold the Executives/National/Local committee officials or any attendees of the conference responsible. Any damage to the hotel room or property caused by me and all incidental expenses will be my responsibility. I will make all cancellation requests in writing before **May 31st, 2012, and I am aware that no refunds will be made after this date.** Signature: _____ Date: _____

FOR OFFICE USE ONLY

Registration Received Date: _____ Entered By: _____ Verified By: _____ Amount Due: _____
 Registration #: _____ Notes: _____