

SPOUSE REGISTRATION FORM

Agency: _____

Billing Address: _____

Phone Number: _____

Name: _____

		Price Per Person	Total Cost:
REGISTRATION FEE: (fee for attendance at annual meeting		\$15.00	_____
Tuesday:	Welcome Reception	\$35.00	_____
Wednesday:	Auto Museum/Lunch	\$45.00	_____
	Coronado Theater Tour/Dinner	\$50.00	_____
Thursday:	Japanese Garden/Lunch/Crimson Ridge	\$45.00	_____
	Annual Banquet "Caribbean Extravangza"	\$50.00	_____
		**Total	_____

****CANCELLATIONS MUST BE RECEIVED IN WRITING BY THE IAWA OFFICE**

NO LATER THAN

September 13, 2011

TO RECEIVE A REFUND.