

Registration Information

Cancellations, Refunds and Booking Changes

Cancellations on or prior to April 11 will be subject to a \$50 per person administrative fee. Cancellations thereafter, or early departures that deviate from the dates to which you have committed, will be subject to a \$50 per person administrative fee plus two nights' room charge. In the event of death or medical emergencies, all or portions of these penalties may be waived. Please inform WMA of any changes immediately.

There will be NO refunds for no-shows on any portion of the trip. Insurance policy information for trip cancellation or interruption will be provided to all registrants at the time of confirmation. It is strongly recommended that you review all materials carefully upon receipt to protect your investment. Both land and air can be protected in this manner.

Check here if you have a disability that requires special accommodations in order to fully participate in this seminar. You will be contacted by WMA to discuss your specific needs.

Hertz Car Rental will provide discounted rates, guaranteed one week before through one week after the meeting dates. Reservations may be placed online at hertz.com or by calling 800.654.2240. Refer to convention code CV#02RE0026.

Hawaiian Airlines is pleased to partner once again with WMA and offer a special discount off their lowest rates from any California gateway. Simply go to hawaiianair.com/affiliate and refer to WMA's code AMWEBWMA.

Mail or fax this completed form with payment to:

WMA
455 Capitol Mall, Suite 800
Sacramento, CA 95814
916.448.7085 (fax)

For more information, call Regina Sánchez at 916.448.7002 or toll free (within CA) at 800.669.8847 or email regina@wma.org.

PLEASE NOTE:

You are urged to register no later than April 1 to guarantee space and group rate at the JW Marriott Ihilani. Reservations will be based on space and rate availability only thereafter.

REGISTRATION FORM

2014 WMA Spring Seminar — April 26 - May 3

Name 1: Seminar Registrant _____

Name 2: Seminar Registrant or Hotel Only _____

Community/Firm Name _____ Membership ID _____

Mailing Address _____

City _____ Email Address _____

State _____ ZIP _____

Day Phone _____ Evening Phone _____ Cell Phone _____

The JW Marriott Ihilani Resort & Spa Ko Olina

With double occupancy rates, you can select one or two full educational seminar registration(s). Each person must register for educational seminars in order to make a trip fully tax deductible. WMA has negotiated run of house rooms. Run of house refers to the different room types that are offered by the resort at the same price—depending on availability at the time you check in. If you prefer a guaranteed ocean view room, please call Regina at 800.669.8847, for pricing. Educational seminars include a breakfast on seminar days in the Naupaka restaurant. The resort is 100% smoke-free.

Double Occupancy with 1 Educational Seminar Registration – \$1,795 per person \$ _____

Double Occupancy with 2 Educational Seminar Registrations – \$2,330 per person \$ _____

Single Occupancy with 1 Seminar Registration – \$3,515 per person \$ _____

Seminar Only— \$1,300 per person \$ _____

Preferred Bed Type: One King Bed Two Double Beds

Number of children under 18 in parents' room: _____; Ages: _____

(No additional charges for children ages 18 and under staying in parents' room, using existing bedding.)

Will use existing bedding Crib (no additional cost, based on availability)

Third person in room over age 18 (add \$625) Roll-away (add \$525) \$ _____

Room Reservations: Arrival Date April _____, 2014; Departure Date May _____, 2014

The Welcome Reception and Farewell Dinner are NOT included in any packages:

Welcome Reception (Sunday, April 27)—\$125 per person x total # _____ \$ _____

Paradise Cove Luau (Monday, April 28)—\$150 per person x total # _____ \$ _____

Walking Tasting Tour (Tuesday, April 29)—\$150 per person x total # _____ \$ _____

Catamaran Snorkel Sail (Wednesday, April 30)—\$135 per person x total # _____ \$ _____

Farewell Dinner (Thursday, May 1) – \$150 per person x total # _____ \$ _____

TOTAL AMOUNT DUE WMA \$ _____

Payment Information

Check # _____ AMEX Visa MasterCard Discover

Name on Card _____

Card # _____

Exp. Date ____/____/____ Email Address _____

Billing Address _____ City _____ ZIP _____

Signature _____