|  |  |
| --- | --- |
| Full Name: |  |
| Address: |  |
| Email: | Phone: |
| Registration Fees (USD): |  |
| Chapter: | Class of: |

**Registration Fees**:

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Now to May 31st, 2016 (Early Bird)** | | **June 1st-30th, 2016** | | **July 1st-30th, 2016** | | **August 1-5th 2016** | | **Throughout Reg period** |
| Member $190 | NonMember  $350 | Member $200 | NonMember  $360 | Member $210 | NonMember  $370 | Member $220 | NonMember  $380 | Spouses, Guests $75 , Kids $45 |

|  |  |
| --- | --- |
| Bus Tour - | $30 |
| Kids below 12yrs – Kids Meal | $45 |
| Project Fee(one time) | $100 |
| ExSSA – USA New Membership | $25 |

**Registration for the TOUR will be on a first come, first served basis, with a deadline of June 30th , 2016**

|  |  |  |
| --- | --- | --- |
| SUMMARY | **Quantity** | **Total $ Amount** |
| **Registration Fee** |  | $ |
| **Nat'l Membership Fee** |  | $ |
| **Project Fee** |  | $ |
| **Spouse and Guest** |  | $ |
| **Kids below 12** |  | $ |
| **Student** |  | $ |
| **Bus Tour** |  | $ |
| ***Total $*** |  | *$* |

All Checks payable to **"ExSSA-USA".** Mail Checks and registration forms together to -**Kidi Makia, 3191 Medical Center Dr #31103, McKinney TX 75069 Tel #: 469-667-3382 (Attention: Convention Registration for easy identification).**