

**EACNA V PRE-REGISTRATION
JANUARY 18, 19, & 20, 2019
SAN ANTONIO TX**

NAME: _____
CLEAN DATE: _____
ADDRESS: _____
CITY/STATE/ZIP: _____
AREA/REGION: _____
TELEPHONE: _____
EMAIL: _____

_____ **CHECK HERE IF YOU DO NOT WISH TO RECEIVE THE EACNA V NEWSLETTER**

EVENT SUPPORT REGISTRATION: \$10.00 X _____ = _____
PRE-REGISTRATION: \$15.00 X _____ = _____
NEWCOMER REGISTRATION \$15.00 X _____ = _____
NEWCOMERDONATION _____ = _____
BANQUET TICKET: \$35.00 X _____ = _____
TOTAL: _____

I AM INTERESTED IN VOLUNTEERING IN THE FOLLOWING:

WORKSHOP CHAIR _____ **MARATHON MEETINGS CHAIR** _____ **HOSPITALITY** _____
SERENITY KEEPER _____ **REGISTRATION** _____

MAILING ADDRESS:
PO BOX 120094
SAN ANTONIO, TX
78212

Convention Chair: Liz S (210) 607-3828
Vice Chair: Krysa R. (210) 668-4759
Registration Chair:
Leonora G (210) 772-2326

HOTEL INFORMATION:
EL TROPICANO HOTEL
110 LEXINGTON AVE
SAN ANTONIO, TX 78205
(210) 223-9461

WEBSITE:

eacnasa.org