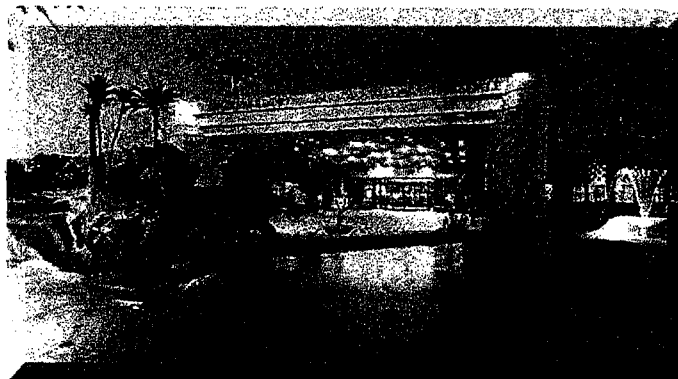




Scottsdale, AZ



Double Tree Resort
5401 N Scottsdale Rd
Scottsdale, AZ 85250



ROOM RATES

standard: \$119 (upgrades may be available)

RESERVATIONS

visit arizona-na.org/arena or call
480-947-5400

What is the purpose of ARCNA?

The purpose of the Arizona Regional Convention of Narcotics Anonymous is to stimulate growth for the local fellowship and encourage unity with an annual celebration of our recovery.

Why do we register?

Registration fees pay for the hotel facilities that we use for our convention. These fees are also used to help carry the message of NA in our region and world wide, including providing for newcomers at this convention. As our fellowship grows, so does the demand for meeting space. This means we need to look for larger facilities, at an increased cost. Our 7th Tradition states, "We should be fully self-supporting through our own contributions..."

ARCNA XXX



REGISTRATION

Mail this form to ARCNA, PO Box 1429, Phoenix, AZ 85001

Or register online at www.arizona-na.org/arcna after 12/15/15

ITEM	QUANTITY	PRICE	SUB TOTAL
Full Pre-Registration before April 15, 2016 Includes Registration, Friday Dance, Saturday Banquet, Comedy Show, BINGO Game Pack (10 games), Sunday Breakfast, ARCNA COIN banquet option ()beef ()chicken ()vegetarian		x \$125=	
Pre-Registration before April 15, 2016 (includes Friday dance)		x \$30=	
Registration after April 15, 2016 (includes Friday dance)		x \$35=	
Saturday Banquet ()beef ()chicken ()vegetarian		x \$50=	
Saturday Comedy Show		x \$15=	
Sunday Breakfast Buffet		x \$27=	
OPTIONAL ADDITIONS			
BINGO game pack (10 games)		x \$10 =	
Newcomer Donation/Giving Back	<i>we give what we can!</i>		
ARCNA XXX COIN *not available after April 15, 2016 free with FULL pre-registration		x \$5 =	
		TOTAL	



Registration packets will be available for pick up at the Registration table at the event. Please complete the following information so that we may identify you at the event or contact you if we have questions or information about your registration.

Clean Date: (mm/dd/yyyy) _____ Miles Traveled: _____

Name(s) _____

Address _____

City _____ State _____ Zip _____

Phone _____ Email _____

Charge my Registration to this credit card:

Name on card _____

Card No. _____ CCV _____

Expiration Date _____ (circle one)   

Signature _____

complete and mail this form to:
 ARCNA - PO BOX 1429, PHOENIX, AZ 85001

make checks payable to ARCNA pre-registrations must be postmarked by April 15, 2016 sorry, no refunds for cancellations