

REGISTRATION INFORMATION

Cancellations, Refunds and Booking Changes

Cancellation fees are as follows:

On or prior to February 22 will be subject to a \$50 per person administrative fee.

On February 23 through March 15, 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.

On March 16 or thereafter, including no-shows, there will be NO refunds on any portion of the trip.

In the event of death or medical emergencies, all or portions of these penalties may be waived. Please inform WMA of any changes immediately.

Insurance policy information for trip cancellation or interruption is available from many carriers online. 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#02RE0033.

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 February 15 to guarantee group rate at the Sheraton. Reservations will be based on space and rate availability only.

REGISTRATION FORM

2019 WMA Spring Seminar — March 23 through March 30

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 _____

Sheraton Maui

With double occupancy rates, you can select a full week of seminar registrations for one or two persons. Each person must register for educational seminars in order to make a trip fully tax deductible. WMA has negotiated run of ocean view rooms. Pricing includes daily resort fees which covers basic wireless internet access and self-parking for one vehicle per room. Educational seminars include a breakfast buffet on seminar days in the hotel's restaurant, ROCKsalt. The hotel is 100% smoke-free.

Dbi Occupancy with 1 week of seminar registrations for 1 person—\$2,125 per person x 2 \$ _____

Dbi Occupancy with 1 week of seminar registrations for 2 persons—\$2,700 per person x 2 \$ _____

Sgl Occupancy with 1 week of seminar registrations for 1 person—\$4,000 per person x 1 \$ _____

Guest Room Reservations (please complete every applicable line):

Arrival Date March _____, 2019; Departure Date March _____, 2019

Total number of room nights _____

Preferred Bed Type: One King Bed Two Queen 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.)

3rd/4th person in room over age 18 add \$775 each; Roll-away \$500/King room only \$ _____

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

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

Welcome Reception (Sunday, March 24) – \$160 per person x total # _____ \$ _____

Snorkel Sail Tour (Wednesday, March 27) – \$160 per person x total # _____ \$ _____

Farewell Dinner (Thursday, March 28) – \$165 per person x total # _____ \$ _____

Other optional activities will be announced as they become available.

TOTAL AMOUNT DUE WMA \$ _____

I am a golfer and wish to be put in contact with other golfers at Spring Seminar.

Payment Information

Check # _____ AMEX Visa MasterCard Discover

Name on Card _____

Card # _____

Exp. Date _____ Email Address for Receipt _____

Billing Address _____ City _____ ZIP _____

Signature _____