

**9th ANNUAL HOGA CONFERENCE
MINI-TRADE SHOW & NURSERIES OPEN HOUSE**

Hilo Yacht Club Nov. 2, 3, 4

REGISTRATION FORM

Name: (Last) _____ (First) _____ Title: _____

Name as you wish it to appear on your nametag: _____

Business/Organization: _____

Address: _____

Daytime Phone: (____) _____ Fax: (____) _____

Email: _____

I am attending:

Friday Night Social & Auction \$30 ea. x _____ = \$ _____

Saturday Conference (includes lunch) \$80 ea. x _____ = \$ _____

Sunday Nursery Tour \$35 ea. x _____ = \$ _____

Registration Fee Total \$ _____

(At the door: Fri. Night Social \$35, Sat. Conference \$90, Sun. Advance Sale Only)

Payment Information:

Check (Please make payable to: Hawaii Orchid Growers Association)

Purchase Order # _____

Credit Card Master Card _____ Visa _____

Card # _____ Exp. Date: _____

Registration Deadline is October 26, 2007

Questions? 808-345-1371

Please mail completed registration form to:

Hawaii Orchid Growers Association

P.O. Box 2152

Keaau, HI 96749

or

Fax completed registration form to Ken Armour: 808-963-6736