



**Hawaii University International Conferences  
SPONSOR & EXHIBITOR REGISTRATION FORM  
2019 STEM/STEAM and Education Conference  
June 5,6 & 7 Honolulu, Hawaii  
Hawaii Prince Hotel Waikiki**

For Mailing or Fax in registration: Please complete all sections of this form, send in by regular mail to P.O. Box 29056, Honolulu, Hawaii 96820 or fax to: 1-808-847-4288. Once received, we will acknowledge it by e-mail. For any questions, contact us at office phone: 1-808-537-6500.

<input type="checkbox"/> Exhibitor <input type="checkbox"/> Sponsor		
Company's Name:		
Company's Official Contact Name:		
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Conference Exhibitor/Sponsor Registration Fees:		
<input type="checkbox"/>	1. Tier I:      US\$500.00	(Includes 2 breakfasts on June 5, & 6, 2019)
<input type="checkbox"/>	2. Tier II:     US\$1,000.00	(Includes 2 breakfasts on June 5, & 6, 2019)
<input type="checkbox"/>	3. Tier III:    US\$2,000.00	(Includes 2 breakfasts on June 5, & 6, a Lunch on June 7, 2019)
<input type="checkbox"/>	Additional Breakfast @ \$40.00 each	Number/s of Additional Breakfast: _____
<input type="checkbox"/>	Additional Lunch @ \$45.00 each	Number/s of Additional Lunch: _____
<b>Deadline for Registration: May 17, 2019</b>		Sub Total: _____
<b>Confirmation of participation is by payment only.</b>		

Check/Cheque (No personal account): Please make check/cheque payable in US\$ only to: **"Hawaii University International Conferences"** (Federal ID #27-3464653) and mail it with your completed registration form to **Hawaii University International Conferences, P.O. Box 29056, Honolulu, HI 96820.**

Credit cards: for faxing and mailing in registration:       Visa       Mastercard

Please charge the total amount/payment: (including payment for additional breakfast and lunch)		Total Amount US\$: _____
Card #: <input type="text"/> - <input type="text"/> - <input type="text"/> - <input type="text"/>	Expiration Date: <input type="text"/>	*CCV#: <input type="text"/>
Name on card:	Signature: _____	

\* This is a 3-digit security number written on the backside of your credit card.

For Official Use Only:	Received on: _____	Recorded by: _____
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