

Hawaii University International Conferences REGISTRATION FORM

2025 Arts, Humanities, Social Sciences & Education Conference January 6 - 8, 2025 - *Prince Waikiki Resort* - Honolulu, Hawaii

For Mailing or Fax in registration: Please complete all sections of this form, send in by regular mail to P.O. Box 29056, Honolulu, HI 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.

Preferred salutation:	Prof. Mr. Or. Mrs		Presenting Non-presenting		
First Name:	Family/La	Family/Last Name:			
Affiliation:	Departme	Department:			
E-mail Address:					
Alternate E-mail Address:					
Mailing Address:					
City:	State:		Zip/Postal Code:		
Country:	Contact/Ph	none:			
CONFERENCE REGISTRATION FEES					
1. US\$400.00 ((Early registration by August 31, 2024)					
2. US\$460.00 (September 1 – October 31, 2024)					SUB TOTAL
3. US\$520.00 (November 1 – December 16, 2024) 4. US\$570.00 (December 17, 2024 – January 08, 2025)					
The Conference Registration includes breakfast for January 6 & 7, 2025 and one lunch on January 8, 2025					
Each additional breakfast/lunch (Per Meal) for family and friends: (Includes Tax and Gratuity)					
Adult Breakfast – Day 1 – January 6					
Children (6-10 years) Breakfast – January 6US\$35.00x (Qty/#) US\$					
Children (6-10 years) Breakfast – January 7US\$35.00 x (Qty/#) US\$ SUB TOTAL					
Adult Lunch – January 8					
Children Lunch (6-10 years) January 8, US\$40.00 x (Qty/#) US\$					
*There is a charge of \$95.00 for service and administration for refunds on registration. Requests for refund and cancellation must be received in writing/e-mail by November 30, 2024. There will be no refunds after December 1, 2024. Confirmation of participation is by payment only.					
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.					
Please charge the total amount/payment: (including payment for additional meals)			Total Charge	Total Charges in US\$	
Credit cards: for faxing and mailing-in registration:				Ma	astercard
Card #: Expiration Date: *CCV #:					
Name on card: Signature:					
Card's Billing Address:					
City:	State:	Zip/Postal Code:	Postal Code: Country		

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