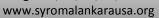


The Syro-Malankara Catholic Apostolic Exarchate in the USA Eighth Syro-Malankara Catholic Convention MAR IVANIOS NAGAR **Hudson Valley Resort** 400 Granite Road • Kerhonkson, NY 12446

August 9, 10, 11, 12, 2012





Complete the registration f	form by printing a		STRATION FO				Reg #: Offic	ce Use Only
Read the instructions and information on the next page before filling up this form								
First name					Gender (•	Age	
		M / F						
Name of your Parish		'	P			Place		
Home Address			City	,	State/	e/Province Zip Code		
			,		•			
Home Phone		Call Phone	Cell Phone Email					
Home Phone		Cell Filone	Centrione					
Other family members part	ticipating in the co			A	C 1 1 -		Deletterebie	
First name		Last name		Age	Gender (c	ircle One)	Relationship	
2					M / F			
3					M / F			
4					M / F			
5					M / F			
6					M / F			
7					M / F			
-					IVI / F			
Special needs if any: Name:								
Name:								
Name:								
SIGNATURE: Valid Signature local/state/federal/church rule violation of such rules. In case I and all others mentioned	es and regulations. To of a dispute, the decinothing in this registration	The Syro-Malankara Cathol cision of the core committe n form agree to comply	lic Exarchate reserve comprising of Ch	ves the right to den airman, Co-chairma	y, suspend or ter n, General Conve	rminate the privi ner and General S	lege of participants a Secretary will be fina	at any time for any
States relevant to the regis Name/Your Signature:					Date:			
Name/Your Signature: Date: Certified by the Parish Priest: Date:								
Parent's or legal guardian's								
Name/(Parent/Legal Guard		Signature:			Date:			
Flight arrival time (if applic	cable)	Airport				tion Required (Circle) Yes	No
Number of persons	#	Worksheet 1 Cost per perso		our cost for the co Sub Total		Office He	e (Do not write in	this column)
Adults (Age 18+)	#	Cost per perso	"11	Sub rotar		Office US	ב ושט ווטג אווגפ וח	uns coluititi)
Child (Age 13-17)								
Child (Age 6-12)								
Sponsor								
Souvenir Compliment		Full Half	Quarter					
		Grand ⁻	Total	\$				
Payment enclosed	\$	Payment I	Pending	\$				
Office use only - Please do Date received:	, ,		Re	gistration #:	Date	confirmation so	ent:	
Remarks:								

Registration Instructions and Information Keep this sheet for your records

- Only one registration form is required per family.
- The Registration Form can be downloaded from the official website of the exarchate www.syromalankarausa.org
- A family of four will be assigned a room with two double beds. However, an extra portable bed for one child may be available upon request for an additional fee of \$50 in addition to the stipulated fee of \$150/200. For a crib, the additional charge will be \$20.
- Requests for an extra bed or crib must be placed along with the registration. Spot requests will have a fee of \$10 per day in addition to all other charges.
- Normally, children are admitted only along with the parents or guardians. However, if they need separate room, an adult's room rate will be charged for the first child.
- Guests are not considered as part of the family and therefore require individual registration.
- A non-refundable advance of \$100 per head is required, if full payment is not made at the time of registration. All remaining payments should be made before **06/30/2012**.
- You may be required to present your credit card at the time of hotel check-in.
- Check in at the resort begins at 3pm on Thursday August 9th 2012.
- Transportation will be provided upon request only from New York JFK and La Guardia Airports on Thursday, between 9am to 12 Noon on August 9th, 2012.
- Transportation back to the airport will be available only after 2 pm on Sunday, August 12, 2012.

Convention rates include food and accommodation. All rates are in US Dollars

(US & Canada)	Per Person	Souvenir Compliments	Rate
1 Adult (Age 18+)	\$475	Full Page Color	\$300
2 Adults	\$375 EACH	Half page color	\$200
3 Adults	\$325 EACH	Quarter page color	\$100
4 Adults	\$300 EACH	Note: Publication of the souvenir will be on October 3rd 2012, in order to document the	e details of the convention in a better way
Child (Age 13-17)	\$200 EACH		
Child (Age 6-12)	\$150 EACH		

Sponsorship Benefits

MEGA SPONSOR	Custom package, full page souvenir compliment, plaque, etc.	
PLATINUM SPONSOR (\$5000)	Special package, 3 rooms, max 6 people from the same family, full page souvenir compliment,	
	plaque, etc.	
GOLDEN SPONSOR (\$2500)	Two rooms, max 4 people from the same family, an additional child can be admitted for extra	
	fee (age 13-17, \$200 and age 6-12, \$150), Half page souvenir compliment, etc.	
Special recognition on the stage for all sponsors		

Worksheet for calculating your cost for the convention

Number of persons #		Cost per person			Sub Total
Adults (Age 18+)					
Child (Age 13-17)					
Child (Age 6-12)					
Sponsor					
Souvenir Complement		Full	Half	Quarter	
			Grand To	otal	
Payment Enclosed	\$	•	Payment	t Pending	\$

PAYMENT: Please make personal check, cashier's check or money order payable to "Malankara Catholic Mission of North America". A bank service fee of \$35 will be charged for returned checks. Please send your completed Registration Form and the payment to the address below Mailing Address:

Important Dates

Mar Ivanios Syro-Malankara Catholic Center	Registration begins: Jan 29 th 2012
ATTN: Fr. Sunny Mathew Kavuvila	Registration ends: June 30 th 2012
950 Hillside Avenue	
New Hyde Park, New York 11040	

CONFIRMATION: You will receive an email confirmation about your registration from the registration convener indicating your registration number. Please note it in the column below and use it for all future communications.

Registration/Confirmation Number

Online registration is also available

Please visit the following link for information on how to register via online: http://www.syromalankarausa.org

Note: There will be an additional charge for online registration (\$10 surcharge for up to \$500, \$20/\$1000, \$30/\$1500, \$40/\$2000, \$50/2500).

Registration Enquiries: Registration Convener: Rev. Fr. Sunny Mathew Kavuvila: (516) 642 4356, frsunnymathew@gmail.com, Registration Secretary: Biju Kuruvilla: (609) 556 8338, biju98@yahoo.com, General Convener: Rev. Fr. Augustine A. Mangalath: (203) 444-8542, AAbraham@srhs.org, General Secretary: Mr. Philip John: (201) 244-1433 / (917) 991-6011, kannamkulam@hotmail.com