



The Syro-Malankara Catholic Apostolic Exarchate in the USA
 Ninth Syro-Malankara Catholic Convention
 MAR IVANIOS NAGAR
 The National Conference Center
 18980 Upper Belmont Place, Leesburg, VA 20176
 August 6-9, 2015
 www.syromalankarausa.org



REGISTRATION FORM

Reg #: Office Use Only

Complete the registration form by printing all applicable information in block letters
 Read the instructions and information on the next page before filling out this form

First name	Middle name	Last name	Gender (Circle One) M / F	Age

Name of your Parish	Place

Home Address	City	State/Province	Zip Code

Home Phone	Cell Phone	Email

Other family members participating in the convention

	First name	Last name	Age	Gender (Circle One)	Relationship
1				M / F	
2				M / F	
3				M / F	
4				M / F	
5				M / F	
6				M / F	
7				M / F	

Special needs if any:

Name:	
Name:	
Name:	

SIGNATURE: Valid Signature is required for the acceptance of registration. By signing in the form, participants accept the package selected and agree to abide by any applicable local/state/federal/church rules and regulations. The Syro-Malankara Catholic Exarchate reserves the right to deny, suspend or terminate the privilege of participants at any time for any violation of such rules. In case of a dispute, the decision of the core committee comprising of Chairman, Co-chairman, General Convener and General Secretary will be final.

I and all others mentioned in this registration form agree to comply with all the rules and regulation set forth by the Syro-Malankara Catholic Exarchate of United States relevant to the registration and convention.

Your Name/ Signature: _____ Date: _____

Certified by the Parish Priest: _____ Date: _____

Parent's or legal guardian's signature is required for anyone under the age of 18, if not accompanied by parents/legal guardian

Name/(Parent/Legal Guardian) _____ Signature: _____ Date: _____

Worksheet for calculating your cost for the convention

Number of persons	#	Type of room	# of rooms	Sub Total	Office Use (Do not write in this column)
Age above 12 (born on or before August 6, 2003)					
Child (Age 5 -12) (born between August 5, 2003 and August 5, 2010)		Children 12 and below should stay with an adult			
Sponsor Level					
Souvenir Compliment		Full	Half	Quarter	
		Grand Total		\$	
Payment enclosed	\$	Payment Pending		\$	

Office use only - Please do not fill anything in this section

Date received: _____ Official: _____ Registration #: _____ Date confirmation sent: _____

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.syromalankarawsa.org
- 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 part of the family and therefore require individual registration.
- All participants aged 12 and above (born on or before August 6, 2003) are charged an adult rate.
- A standard room contains one double bed. A roll-out bed can be made available if a child needs to stay in a standard room. A maximum of only three people (including a child) is allowed in a standard room.
- A suite contains one double bed and a pull-down double bed (max occupancy is 4 persons).
- If suites are not available, two standard rooms will be assigned at the rate of a suite.
- 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 **07/15/2015**. Your registration is deemed confirmed only after the full payment.
- Those who need transportation from Dulles International Airport to the Convention Center may kindly contact the Convener of the Transportation Committee or the Registration Committee.
- You may be required to present your credit card at the time of hotel check-in.
- Check-in at the Conference Center begins at 3 pm on Thursday August 6th 2015.

Convention rates include food and accommodation (from 3.00 pm on Aug. 6 to 1.00 pm on Aug. 9).

All rates are in US Dollars

Accommodation Type	Rate	Souvenir Compliments	Rate
1 Adult (Standard Room)	\$600	Full Page Color	\$300
2 Adults (Standard Room)	\$900 total	Half page color	\$200
2 Adults + 1 child (Standard Room)	\$1080 total	Quarter page color	\$100
3 Adults (Suite)	\$1350 total	Note: Souvenir will be published at a later date with pictures and report of the convention	
4 Adults (suite)	\$1650 total		
1 Child (Age 5-12)	\$180		

Sponsors

Level	Benefits
MEGA SPONSOR (\$10,000)	1 suite + 3 rooms & 10 persons, full page souvenir compliment, plaque
PLATINUM SPONSOR (\$5000)	1 suite + 2 rooms & 8 persons, full page souvenir compliment, plaque
GOLDEN SPONSOR (\$3000)	1 suite + 1 room & 5 persons, Half page souvenir compliment, plaque

- Special recognition on the stage for all sponsors

Worksheet for calculating your cost for the convention

Number of person's	#	Room Type	# of rooms	Sub Total
Above 12 years				
Child (Age 5 - 12)		Children 12 and below should stay with an adult		
Sponsor Level				
Souvenir Complement		Full Half Quarter		
		Grand Total		
Payment Enclosed		\$	Payment Pending	\$

PAYMENT: Please make personal check, cashier's check or money order payable to "Syro-Malankara Catholic Exarchate". For each returned check, a bank service fee of \$35 will be charged. Please send your completed Registration Form and the payment to the address below.

Mailing Address:

ATTN: Fr. Sunny Mathew Kavuvila
 Syro-Malankara Catholic Exarchate
 1500 De Paul St
 Elmont, New York 11003

Important Dates

Registration begins: Nov 9th 2014
 Registration ends: **July 15th 2015**

CONFIRMATION: You will receive an email confirmation about your registration from the Registration Convener indicating your registration number. Please note that in the column below and use it for all future communications. However, your registration will be deemed confirmed only after receiving the full payment.

Registration/Confirmation Number

Online registration is also available

Visit the following link for information on how to register via online: [http:// www.syromalankarawsa.org](http://www.syromalankarawsa.org)

Registration Enquiries: Registration Convener: Rev. Fr. Sunny Mathew Kavuvila: 347.666.7426, frsunnymathew@gmail.com;
 General Convener: Very Rev. Fr. Augustine A. Mangalath: 203.444.8542, mangalath@att.net