Caribbean Nurses Organization

33rd Biennial Meeting and Conference October 20th- 26th 2024 Ramada Georgetown Princess Hotel East Bank, Demerara, Georgetown, Guyana

Host Country Guyana





REGISTRATION FORM

Please complete the form in its entirety. Kindly submit the form with the appropriate payment to:

Caribbean American Nurses Association, Inc. (CANA) Post Office Box 340390 Brooklyn, New York 11234

Final payment must be submitted no later than August 10, 2024.

Name				Gender		
Address						
City	State	Zip	Email _			
Telephone (Cell)	(Home)			(Work)		
Nurses Association						
Voting Delegate						
Sharing Room With						
Accompanying Person(s)						
() Relative () Friend () Child/Children	n (Name and Age	e)			
Name						
Emergency Contact			Relationship			



REGISTRATION FEE

	EARLY REGISTRATION	LATE REGISTRATION	Room Occupancy	Price	# of Persons	Cost Per Person For 7 Nights
MEMBERS	US \$350	US \$375	SINGLE	\$385	1	\$2695.00
NON-MEMBERS	US \$375	US \$400	DOUBLE	\$385	2	\$1347.50
RETIRED	US \$300		TRIPLE	\$560	3	\$1306.67
STUDENT	US \$150	US\$175	QUAD	\$560	4	\$980.00
DAILY REGISTRATION	US \$100			1	1	

INDICATE PREFERENCES BELOW

	Early	Plus 2 nights	Plus 2 nights	Plus 2 nights Triple	Plus 2 Nights	Total Due
	Registration	single room	Double Room	Room	Quad	
Members	US \$350	\$1120	\$735	\$723.33	\$630	
Non-Members	US \$375	\$ 1145	\$760	\$748.33	\$655	
Retired	US \$300	\$1070	\$685	\$673.33	\$580	
Students	US \$150	\$920	\$535	\$523.33	\$430	
Grand Total						

CARIBBEAN NURSES ORGANIZATION (CNO) BIENNIAL MEETING AND CONFERENCE REFUND POLICY

CNO Conference Refund Policy in the event of cancellation

- > 1 month before conference Full Refund
- ➢ 3 weeks before conference minus 5%
- ➤ 2 weeks before conference minus 10%
- ➤ 1 week before conference minus 15%

Full refund for emergency/crises/disasters (each application for full refund will be determined based on the situation).

PLEASE NOTE:

- > All payments are in US dollars
- > Two nights' accommodation <u>Must</u> be paid with registration.
- > All registrations must be booked with Caribbean American Nurses Association (CANA).
- > There is an additional <u>\$50 processing</u> fee per registration to cover bank transaction costs

Payments can be made by check or money order to:

Caribbean American Nurses Association, Inc. (CANA)

C/O Sharon Bedford

8509 Avenue N

Brooklyn, NY 11236

Payment Plan

1st Payment due on or before May 10, 2024

Final Payment due on or before August 10, 2024

Travel Information

Please enter your travel details below if available (please note information must be submitted with final payment).

Date of Arrival	Time of Arrival	Date of Departure	Time of Departure
Airline	Flight Number	Name of Arrival Airport	Name of Departure Airport