



Key Club District Convention

Instructions (please read carefully):

- 1. Registrations must be typed or very legibly handwritten.** If desired, the registration form can be downloaded from the District website in a fillable format so that you can complete it on a computer. If there are any Students or Advisors who need or want vegetarian meals, please place a LARGE "V" next to their name(s) on the registration form. A separate note should be sent for those with other dietary restrictions.
- 2. Registration cannot be processed without a check or credit card (Visa, Mastercard, AMEX or Discover) for the total amount payable.** Make checks payable to Pennsylvania District - Key Club. Credit Card payment must complete the enclosed credit card form. **The entire amount must be included to hold any reservations.**
- 3. The Kiwanis District Office will not match students from different Clubs.**
If students want to be matched with students from another school, the club/students will have to do this on their own and make those arrangements prior to submitting their registration forms to the Kiwanis District office. Clubs are free to make their own arrangements with other clubs. However when those clubs submit their registration forms, it must be clear which clubs are sharing rooms and which students are sharing rooms. Additionally, the advisor must send along a note that he/she has given approval for the sharing arrangement.
- We will continue to offer matching for advisors who otherwise would have to take a single room; we will find you a roommate so that you will not have to take a single room if you do not wish too. However, we will only find one roommate for you. Additionally, you may have to share a king bedded (single bed) room as priority will be given to rooms with 3 or 4 people. **Advisors may not share rooms with students.**
- 5. One Advisor or adult must be registered for every ten (10) Key Clubbers.** All clubs staying at the hotel must have an adult advisor staying with them at the hotel if staying overnight and all clubs coming for Saturday only must be accompanied by an adult advisor.
- 6. The registration deadline for the full package is February 24, 2023. For the Saturday only options, the deadline is March 10, 2023.** Rooms and space cannot be guaranteed for any registrations received after these dates.
- Cancellations will be accepted in writing only - no phone calls. All cancellations must be received by **March 27, 2023.** After that date, no cancellations will be accepted.
- Send completed registration form and payment or payment information to: **Key Club Convention; Kiwanis District Office; 125 North Enola Drive, Suite 206; Enola, PA 17025. Phone: 717-540-9300; Fax: 717-540-1018; Email: Michelle@pakiwanis.org**

FULL PACKAGE REGISTRATION FORM

-- Clearly mark with a "V" any registrants needing/wanting vegetarian meals.

Key Club of _____

High School Address _____

Total Number of Registrations _____ Total Fee Enclosed \$ _____

(All fees must be enclosed with a check or appropriate credit card information. A credit card information form is included in the convention mailing.)

Approximate Time of Arrival _____

Note: The official hotel check in time is 4:00 PM and depends on room availability. If arrival time is not marked, we will assume a 4:00PM arrival for check in purposes.

KEY CLUB REGISTRATION AND ROOM ASSIGNMENT

(Please CLEARLY PRINT or attach separate typed sheet.)

Room 1: Male__ Female__ Room 2: Male__ Female__ Room 3: Male__ Female__

- | | | |
|----------|----------|----------|
| 1. _____ | 1. _____ | 1. _____ |
| 2. _____ | 2. _____ | 2. _____ |
| 3. _____ | 3. _____ | 3. _____ |
| 4. _____ | 4. _____ | 4. _____ |

Room 4: Male__ Female__ Room 5: Male__ Female__ Room 6: Male__ Female__

- | | | |
|----------|----------|----------|
| 1. _____ | 1. _____ | 1. _____ |
| 2. _____ | 2. _____ | 2. _____ |
| 3. _____ | 3. _____ | 3. _____ |
| 4. _____ | 4. _____ | 4. _____ |

Room 7: Male__ Female__ Room 8: Male__ Female__ Room 9: Male__ Female__

- | | | |
|----------|----------|----------|
| 1. _____ | 1. _____ | 1. _____ |
| 2. _____ | 2. _____ | 2. _____ |
| 3. _____ | 3. _____ | 3. _____ |
| 4. _____ | 4. _____ | 4. _____ |

ADULT REGISTRATION AND ROOM RESERVATION

Please indicate whether a Kiwanian, Faculty Advisor, or parent and indicate the desired accommodations - single or double. **All Key Clubs must have one adult staying at the hotel for every 10 Key Clubbers.**

- | | |
|----------|------------------|
| 1. _____ | Room Type: _____ |
| 2. _____ | Room Type: _____ |
| 3. _____ | Room Type: _____ |

CONTACT PERSON: Should any questions or problems arise concerning registration, **please give the name, address, day & evening phone numbers of one of the adult Advisors staying with the club at the hotel. All information below must be provided.**

NAME _____ Phone: Day () _____ Cell () _____

ADDRESS _____

CITY & ZIP CODE: _____ E-MAIL ADDRESS: _____

SATURDAY ONLY REGISTRATION FORM

-- Clearly mark with a "V" any registrants needing/wanting vegetarian meals.

Key Club of _____

High School Address _____

Total Number of Registrations _____ Total Fee Enclosed \$_____

(All fees must be enclosed with a check or appropriate credit card information. A credit card information form is included in the convention mailing.)

Select an option for the entire club:

_____ Option 1: \$110.00 per person

_____ Option 2: \$150.00 per person (with Saturday Dinner)

Names of Key Clubbers attending

1. _____ 2. _____

3. _____ 4. _____

5. _____ 6. _____

7. _____ 8. _____

9. _____ 10. _____

ADULT REGISTRATION

Please indicate whether a Kiwanian, Faculty Advisor or parent. **All Key Clubs must have one adult for every 10 Key Clubbers.**

1. _____

2. _____

3. _____

CONTACT PERSON: Should any questions or problems arise concerning registration, **please give the name, address, day & evening phone numbers of one of the adult Advisors staying with the club at the hotel. All information below must be provided.**

NAME _____ Phone: Day () _____ Cell () _____

ADDRESS _____

CITY & ZIP CODE: _____ E-MAIL ADDRESS: _____

CREDIT CARD INFORMATION

(To be completed and used only if a club is paying for the entire amount due by credit card. **ALL INFORMATION BELOW MUST BE PROVIDED TO PROCESS THE TRANSACTION.**)

CHECK ONE (But only one):

_____ VISA _____ MASTERCARD _____ AMEX _____ DISCOVER

CARD NUMBER:

EXPIRATION DATE (MONTH/YEAR):

Card ID.#:

NAME ON CARD: _____

SIGNATURE: _____

CARD BILLING INFORMATION:

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

PHONE NUMBER: _____