



UNICO NATIONAL

EASTERN REGIONAL MEETING

REGISTRATION

October 27th to 28th, 2017

Marriott Providence Downtown
One Orm Street, Providence, RI 02903

Name _____ Nickname _____

Spouse's Name (non-member only), if attending _____

Address _____

City _____ State _____ Zip _____

Phone _____ E-Mail: _____

Chapter _____ Office _____ District _____
*(i.e. National Officer, DG,
Chapter President, Delegate, etc.)*

Weekend Package \$145.00 per person X _____ = \$ _____
Includes _____
Friday _____
Ice Cream Dessert Reception
Coffee Service
Saturday _____
Continental Breakfast
Cocktail Reception
Dinner (with wine/Cash Bar)

Credit Card (please circle) MasterCard Visa Amex Discover

Card Number _____ Exp. Date _____ Security Code _____

Or, please make check payable to **UNICO National** and mail to address below.

Completed forms should be emailed, faxed or mailed no later than **October 15, 2017** to:
uniconational @unico.org

UNICO National 271 US HWY 46 W Suite F-103 Fairfield, NJ 07004 • Fax: 973-808-0043