

REGISTRATION FORM 2024 HTA ANNUAL CONFERENCE

Waikoloa Beach Marriott Resort & Spa September 10-12, 2024 ONLINE REGISTRATION
www.htahawaii.org/hta-annual-conference

| Company: | | | | | | |
|------------------------------|-------------------------|------------------------------------|--|-----------------------------------|--|----------------|
| Authorized By: | | | | | | |
| Street Address: | | | | | | _ |
| City/State/Zip: | | | | | | |
| Email: | | | | | | |
| Phone #: | | | | | | |
| Cell Phone #: | | | | | | _ |
| NAME OF REGISTRANT(S) | SEPT 10 GOLF (\$) | SEPT 11 SEPT 12 FULL (\$) | SEPT 11 LUNCH SESSIONS DINNER (\$) | SEPT II DINNER ONLY (\$) | SEPT 12 LUNCH SESSIONS EXHIBITOR NT (\$) | TOTALS (\$) |
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| | | | GRA | MD TOTA | L (\$) | |
| PAYMENT DETAILS: | | | | | | |
| Payment via check is enclos | ed. Check paya | ble to "Hawo | aii Transportati | ion Associati | on". | |
| Payment via credit card is e | enclosed/paid t | hrough link | below . 2% sure | charge will b | e assessed. | |
| Please bill my company, we | are an HTA m | ember . Com | pany must be | in good fina | ncial standing w | ith HTA. |

Registration forms can be submitted online, emailed to accounts@htahawaii.org, or mailed to: Hawaii Transportation Association, P.O. Box 30166, Honolulu, HI 96820.

For credit card payments, email credit card authorization form to accounts@htahawaii.org or visit https://www.htahawaii.org/chgcdform/.