

**MUST BE RECEIVED
BY MAY 07, 2018**

‘AHA IKI REGISTRATION FORM

JUNE 06-07, 2018, AT COMMUNITY CHURCH OF HONOLULU (HONOLULU, HAWAI‘I)

NAME: _____

CHURCH/ORGANIZATION: _____ ISLAND: _____

MAILING ADDRESS: _____

CITY: _____ ZIP: _____ PHONE: _____ / _____ / _____

BUS

HOME

CELL

EMAIL ADDRESS: _____

EMERGENCY CONTACT (name & phone): _____

Check only ONE of the following.

- ☐ I am an eligible *authorized* voting delegate to the ‘Aha Iki.
☐ I am a non-voting visitor at the ‘Aha Iki.

Voting Delegates only – Check ONE indicating the primary eligibility group to which you belong:

- ☐ 1. Lay church delegate, duly elected by my congregation
☐ 2. Youth/Young adult church delegate (I am _____ years old), duly elected by my congregation
☐ 3. Ordained or Licensed or Commissioned minister w/current standing in _____
☐ 4. Retired minister with standing in _____
☐ 5. Board of Directors of AHEC, SCHCC, SSSA, or CEH **(Please circle one)**
☐ 6. Partnership Ministry Representative

FEES for the ‘Aha Iki

(Registration for the ‘Aha Makua is on a separate form.)

‘Aha Iki \$ 125.00 \$ _____

Total Fees (Make checks payable to: HCUCC) \$ _____

On-line Payment: Registration and credit card payments can be done on-line at <http://ezregister.com/events/24782/>.

Fee includes meals, airport pick-ups. For hotel reservations, use the attached Hotel Reservation Form.

AIRPORT PICK-UP AND RETURN FOR THE ‘AHA IKI

IMPORTANT: THIS INFORMATION MUST BE TURNED IN BY MAY 07 TO ENSURE PICK-UP.

Arrival Date ____/____/____ **Airline/Flight** _____ / _____ **AM/PM**

(On Wednesday, June 06, 2018, your flight must arrive by 8:15 am at the latest for airport pick-up).

Depart Date ____/____/____ **Airline/Flight** _____ / _____ **AM/PM**

[] I will need airport pickup. [] I will not need airport pickup..

Mail this form along with full payment by MAY 07, 2018, to:

‘Aha Iki Registration, HCUCC, 1848 Nu‘uanu Ave., Honolulu, Hawai‘i 96817

PLEASE COMPLETE BOTH SIDES

Necrology Form

Please provide the names of members *(who were previously delegates or participated in 'Aha programs)* who died between June 2017 and May 2018. A list will be compiled and names published in the 'Aha Iki Handbook.

Name (please print):

Date of Death:

Church: _____

Association: _____

Island: _____

Submitted by: _____

Date: _____

PLEASE COMPLETE BOTH SIDES