

Join us in a celebration of recovery at the
**34th Ohio Convention of
 Narcotics Anonymous
 (OCNA-34)**

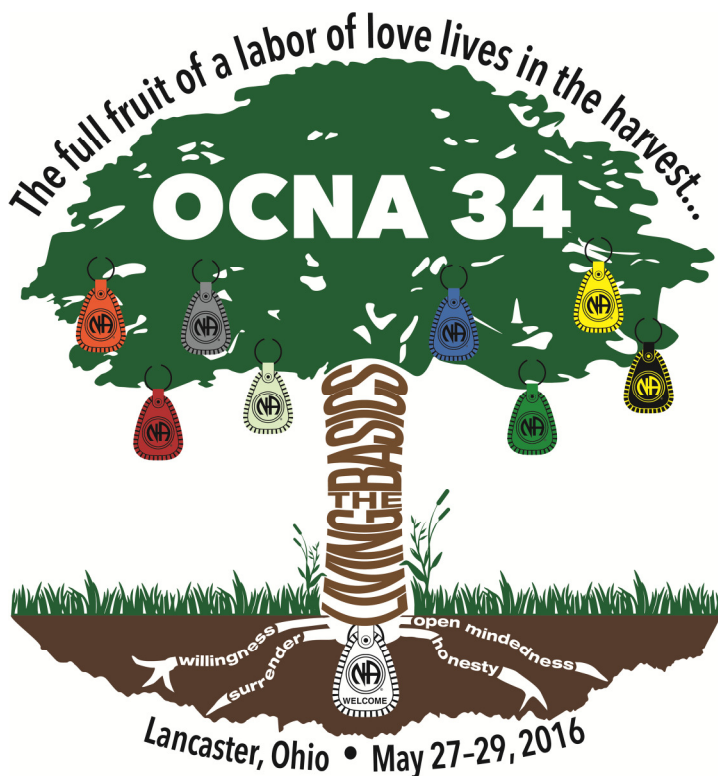
“Living the Basics”

Hosted by the
 Lancaster
 Cooperative
 Area
 (LCASCNA)

May 27th - 29th, 2016

Crossroads Events Center
 2095 W. Fair Ave., Lancaster, OH 430130

Hotel Information



<ul style="list-style-type: none"> Holiday Inn Express (740) 654-4445 1861 Riverway Dr. Lancaster, OH 43130 \$89/night + tax (Don't book until 10/1/2015.) Reservation code is OCNA34. 	<ul style="list-style-type: none"> Baymont Inn & Suites (740-654-5111) 1721 River Valley Circle Lancaster, OH 43130 \$99/night + tax for 2 queen beds \$109/night + tax for 2 king beds (Make reservations before 4/27/16.) Reservation code is OCNA34. 	<ul style="list-style-type: none"> Hampton Inn (740-654-2999) 2041 Schorway Dr. NW Lancaster, OH 43130 \$115/night + tax (Make reservations before 5/1/16.) Link to reserve rooms: http://hamptoninn.hilton.com/en/hp/groups/personalized/L/LH/QOHHX-OCN-20160527/index.jhtml?WT.mc_id=POG
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OCNA-34 – May 27-29, 2016 – Lancaster, OH

www.ohioconventionna.org

Committee Member Contacts:			
Chairperson:	Mark R.	614-270-1274	markroberts@columbus.rr.com
Vice-Chairperson:	Brian F.	740-243-7529	bf733612@ohio.edu
Treasurer:	Keith B.	614-230-7719	keithrbenner@gmail.com
Vice-Treasurer:	open		
Secretary:	Sara S.	614-769-2991	shelinesara@yahoo.com
Vice-Secretary:	open		
Arts & Graphics:	open		
Convention Information:	AJ S. (temp)	740-727-8576	aj81189@gmail.com
Fundraising & Entertainment:	Kelle A.	614-738-1673	kellealavi@gmail.com
Hotels & Hospitality:	Beth T.	478-262-5727	eaktjo@gmail.com
Merchandising:	Doug H.	740-334-2695	doughall@roadrunner.com
Programming:	Dave M.	614-935-4496	angrydave86@yahoo.com
Registration:	Gary B.	937-580-0513	gboddie1@gmail.com
Serenity Keepers:	Marvin H.	514-593-2549	marvinharris2005@yahoo.com
Special Needs:	Michael T.	614-446-6358	mtturner.echo@gmail.com
Welcoming:	Colten K.	740-279-8054	kcolten27@gmail.com



Look for the Serenity Keepers & Welcoming committee members at the hotel for any assistance.

(NOTE: The registration website is currently under construction & should be available starting in October, 2015.)

Program Participation Information

- We are looking for Speakers and Chair People who would share a clear Narcotics Anonymous message at our Convention.
- Clean time requirement for Main Speakers 5 years, Workshop Speakers 3 years, and Workshop Chairpersons 1 year.
- Tapes/CD's will not be returned.
- Submission deadline: December 31, 2015.
- Send to: OCNA-34, Attn: Programming Subcommittee, P.O. Box 2552, Lancaster, OH 43130

Special Needs

- If you have a special need, you must pre-register and contact the Registration Chairperson or Special Needs Chairperson with your requirements. We will attempt to accommodate your needs if at all possible.
- You can also provide details of your special needs below. (Interpreters will be provided for the main speakers.)

Registration Form

- Online registration will be available soon at www.ohioconventionna.org.
- Mail the completed form below along with your check or money order (payable to OCNA).

TO: OCNA-34
Attn: Registration Subcommittee
P.O. Box 2552, Lancaster, OH 43130

- Must be postmarked no later than May 1, 2016 – after that please register at the convention.
- ALL SALES ARE FINAL.
- Seating for the banquet is limited. Tickets may not be available at the convention.

Item	Cost	Quantity	Total
Basic Registration (before 12/31/2015)	\$15.00		
Basic Registration (after 12/31/2015)	\$20.00		
Saturday Night Banquet (Choose: <input type="checkbox"/> - Beef <input type="checkbox"/> - Chicken <input type="checkbox"/> - Vegetarian)	\$28.00		
Saturday Night Dance (included in registration packet – these are extra tickets)	\$5.00		
Sunday Brunch Buffet	\$10.00		
Full Package (includes registration, banquet, brunch) (before 12/31/2015)	\$50.00		
Full Package (includes registration, banquet, brunch) (after 12/31/2015)	\$55.00		
Newcomer Donation (thank you!!)			
OCNA Donation (to help future OCNA Committees)			
Grand Total			

First Name:		Last Name:	
Address:		City:	
State:		Zip:	
Phone:		Email:	

RECEIPT (please keep for your records)

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