REACHING
NEW HEIGHTS
AREAA National Convention 2014
LAS VEGAS | BELLAGIO | SEPT 5-7

AREAA
Asian Real Estate Association of America

Contact Information:

Email Address: _____   Registration Discount Code: _____

First Name: _____   Last Name: _____

Job Title: _____   Company: _____

Address: _____

City: _____   State/County/Province: _____   Zip Code: _____

Country: _____   Mobile Phone: _____

Emergency Contact Name: _____   Phone or email: _____

Do you have any food allergies? ☐ Yes ☐ No   If yes please list: _____

Are you a member of an AREAA Chapter? If yes, which chapter?
☐ Yes   ☐ No

Aloha	Boston	Dallas/Fort Worth	Greater Atlanta	Inland Empire	New York East	Portland	Tri-County
Arizona	Canada	DC Metro	Greater Chicago	Las Vegas	Northern LA	San Diego	Vancouver
Austin	Central Valley	Detroit Metro	Greater LA	Metro New York	Orange County	San Fran Peninsula	Washington State
Boise	Central FL	East Bay	Greater Sacramento	New Jersey	Philadelphia Metro	Silicon Valley	_____

Is this your first time to attend an AREAA event?*
☐ Yes   ☐ No

I give AREAA permission to share my contact information provided above with other attendees.
☐ Yes   ☐ No

Registration Pricing:

Category	AREAA Event	Early Bird Price*	Regular Price	Onsite Price
AREAA Member**	$349.00	$399.00	$499.00	$599.00
Non-Member	$549.00	$599.00	$699.00	$799.00

*Early Bird Pricing Ends Aug 2, 2014

** You must be a current member to receive the discounted member rates. Membership status will be verified upon payment. You will be notified and charged the non-member rate if you are not in the AREAA member database.

Ticketed Event	Date	Time	Price	# of Tickets*
CIPS Class	Friday Sept 5, 2014	8:00 AM to 5:00 PM	$ 50 Member $100 NON Member	
CCIM Class	Friday Sept 5, 2014	8:00 AM to 5:00 PM	$ 50 Member $100 NON Member	
EB-5 Overview	Friday Sept 5, 2014	9:00 AM to 12:00 PM	$ 25 Member $50 NON Member	
theEDGE Event	Sunday Sept 7, 2014	10:00 PM to 1:00 PM	$45 Early, $50 Regular	
Gala	Sunday Sept 7, 2014	7:00 PM to 9:00 PM	$150	
Keynote Luncheon	Sunday Sept 7, 2014	12:15 PM to 1:30PM	$100	

*Max of 10

Payment Total: _____

Credit Card Number: _____   Expiration Date: _____   Card Security Code: _____

Cardholder Name _____   Billing Address: _____

Billing City: _____   Billing State/Province: _____Billing Zip/Postal Code: _____

Signature: _____

Please note program and classes subject to change