



NATIONAL ASSOCIATION of PORT ARTHURANS
44 Years of Unity
REGISTRATION

Early Registration \$225 - Must be postmarked or received electronically by May 1, 2025

Registration Deadline \$250 - Must be postmarked or received electronically by June 1, 2025

Chapter Affiliation (please check) *

DFW
Houston
NorCal
Port Arthur

Address

Street Address

City

State / Province

Postal / Zip Code

Attendee One *

First Name

Last Name

Email *

Phone Number *

Please enter a valid phone number.

T-Shirt Size (available sizes S-4X) *

Meal Choice

Chicken

Salmon

Do you plan to attend the Casino Trip?

Yes, I plan to attend.

No

Attendee Two

First Name

Last Name

Email

example@example.com

Phone Number

Please enter a valid phone number.

Address

Street Address

City

State / Province

Postal / Zip Code

T-Shirt Size (available sizes S-4X)

Meal Choice

Chicken

Salmon

Do you plan to attend the Casino Trip?

Yes I plan to attend.

No

Alternate Payment Option:

Mail your payment and this completed registration form.

. Make your check or money order payable to:

**National Association of Port Arthursans
P.O.Box 51
Port Arthur, Texas 77641**