

PLEASE DO NOT WRITE IN THIS BOX

Check amount: _

Date received:





JUNE 17-20, 2025 • JW MARRIOTT SAN ANTONIO HILL COUNTRY RESORT & SPA

Please type or print clearly • This form can be photocopied

Full Name (First, M.I., Last):		Title:		
Company (As it should appear on you	r badge):			
Full Company Address:				
Phone:F	e: Fax:			
ReMA Member Yes No Cha	pter/ Region :			
NAMES FOR BADGES You:			Child:	
CONVENTION REGISTRATION FEES				
FULL REGISTRATION	ONSITE	# OF PEOPLE	TOTAL\$	
ReMA Gulf Coast Member	\$595	@\$	\$	
ReMA Gulf Coast Member's Spouse	\$275	@\$	\$	
ReMA Gulf Coast Child (5-18)	\$215	@\$	\$	
ReMA Member	\$655	@\$	\$	
ReMA Member's Spouse	\$300	@\$	\$	
ReMA Child (5-18)	\$235	@\$	\$	
Non-ReMA Member	\$915	@\$	\$	
Non-ReMA Member's Spouse	\$520	@\$	\$	
Non-ReMA Child (5-18)	\$350	@\$	\$	
THURSDAY-ONLY ONE-DAY PASS				
ReMA Gulf Coast Member	\$470	@\$	\$	
ReMA Member	\$520	@\$	\$	
Non-ReMA Member	\$770	@\$	\$	
OPTIONAL SOCIAL EVENTS (All option	al events are held o	n Wed 6/18.)		
Hill Country Wine Tour	\$250	@\$	\$	
Golf Tournament (Sold out)	\$300	@\$	\$	
Practice Clinic	\$175	@\$	\$	
		TOTAL PAYMEN	renclosed \$	
PAYMENT INFORMATION				
Payment Type: 🗌 Check 🗌 MC 🗌 Visa			MAKE CHECKS PAYABLE TO: ISRI-Gulf Coast Region	
Credit Card #				
			MAKE CHECKS PAYABLE TO: ISI	RI-

Check number: _