

AKOA 2018 Annual Conference

February 7-10 in Juneau, Alaska

Information and Registration Form

Join us in Juneau, Alaska February 7-10, 2018

The **Alaska Optometric Association's** annual CE conference will be held February 7-10, 2018 at the Centennial Hall Convention Center in Alaska's capitol city of Juneau. One of Alaska's oldest cities, downtown Juneau sits snugly between Mt. Roberts, Mt. Juneau and the Gastineau Channel. Juneau's lively downtown is compact and easy to navigate on foot. Within walking distance are many of Juneau's main attractions including the state capitol building, Saint Nicholas Russian Orthodox Church, several museums and historic South Franklin Street, where turn-of-the-century buildings today are gift shops and restaurants.

Included in your registration

- CE credits from top faculty. Instructors to be announced. Please check our website.
- Exhibit Hall
- Complementary breakfast and lunch served each day.

Lodging information

Westmark Baranof Hotel: 1-800-544-0970 Group Name: "Alaska Optometric Association" Group Code: AKOA18
 Discount Rate: \$159 for a standard room//Premium King Rooms \$189/King Suite rate \$199

This group rate will be available until January 15, 2018 or until the group block sell out. Please book early.

Four Points by Sheraton Juneau: Group Name: "Alaska Optometric Association"

Discount Rate: \$169 for a standard room//Water side rooms or rooms with two queens \$189

Reservations must be made by following the link provided below:

<https://www.starwoodmeeting.com/events/start.action?id=1708299463&key=337C4B01>

This group rate will be available until January 15, 2018 or until the group block sell out. Please book early.

Registration information

Name _____ Name for Badge _____

Address _____

City _____ State _____ Zip _____

Phone _____ E-mail _____

Emergency Info: Contact _____ Relationship _____ Phone _____

Registration fee categories

Registrant Classification	before 12/7/17	After 12/7/17
AKOA Member	\$300	\$350
AOA Member *	\$400	\$450
Non-AOA Member	\$900	\$950
Guest or staff of AKOA Member**	\$50	\$50

** Guest or Staff Name _____

REGISTRATION FEE FROM TABLE AT LEFT	\$
GUEST OR STAFF FEE	\$
GRAND TOTAL	\$

Registration payment

CHECK made payable to AKOA

CREDIT CARD Type: MasterCard Visa American Express

Name on Card _____

Card Number _____

Expiration Date _____ Security Code _____

Billing Address _____

Signature _____

**Mail form with check or credit card
 payment information to:
 Alaska Optometric Association
 3705 Arctic Boulevard, #675
 Anchorage, Alaska 99503**

February 7-10 2018 • www.ako.org

I agree to pay the above Grand Total amount according to the card issuer's agreement.