



6333 W. Bluemound Road  
Milwaukee, WI 53213  
414-771-9511  
office@wi-alliance.org

## WIARA CONVENTION REGISTRATION

Register by February 20, 2015



First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Address: \_\_\_\_\_

City/Zip: \_\_\_\_\_

Organization or Union  
Name \_\_\_\_\_

Email  
Address: \_\_\_\_\_

**Registration Deadline: February 20, 2015**

Mail registration form and a check made payable to WIARA for \$50.00 at 6333 W. Bluemound Road, Milwaukee, WI 53213. The registration fee includes parking, continental breakfast, lunch and registration materials. If you have any questions please call us at 414-771-9511 or email us at [office@wi-alliance.org](mailto:office@wi-alliance.org).

*Vegetarian option for lunch available upon request.*

*Please note any special requests here:* \_\_\_\_\_

*Jb/opeiu*