



Registration Form

All participants must register for the conference.

Please complete this form and send with credit card number, check, or purchase order to:

Kamehameha Schools, PASE
567 S. King Street, Suite 400
Honolulu, Hawai'i, 96813.

Name _____

Organization _____

Title _____ Email _____

Phone _____

Mailing address _____

Check here if you plan to attend Francine Romero's Institutional Review Board (IRB) workshop on Friday, October 21, at 1:00-4:00 pm. This is for registered participants only. Space is limited! (For more information, go to www.ksbe.edu/pase.)

Check here if you plan to attend the cultural activity (historical Waikiki walking tour by the Native Hawaiian Hospitality Association) on Friday, October 21, at 4:30-5:30 pm. This is for registered participants only. Space is limited!

Payment

Registration fee is \$100. (For walk-ins, the fee is \$200.): \$ _____

Payment method: Check P.O. MasterCard Visa

Card number _____

Expiration date _____

Cardholder name _____

Cardholder signature _____