

Why We Register

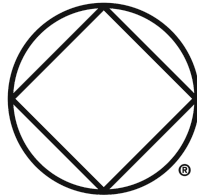
Registration pays for the use of the hotel facilities, registration packet items, and supplies for the hospitality rooms, service maintenance, and other expenses. Your registration fees and support make our convention possible.

All excess funds are distributed back into the service structure to help support our primary purpose- *“to carry the message of Narcotics Anonymous.”*

Our insurance policy and the hotel require all our convention participants always visibly wear their badges throughout this weekend’s events.

Thank you for your participation and cooperation,

38th Annual Ohio Convention
of Narcotics Anonymous



May 27 – 29, 2022

Marriot Cleveland – East
26300 Harvard Road
Warrensville Heights, OH 44122

O.C.N.A. 38

"Better Together"

May 27 – 29, 2021
Marriot Cleveland – East, at I-271
26300 Harvard Road
Warrensville Heights, Ohio 44122

For Hotel Reservations, Call (888) 236-2427
Cutoff Date is April 31st, 2022

Don't Forget to mention the NA Convention or OCNA 38
(For our special room rates) Single/Double Rate \$115 + tax and a returnable holding deposit of \$50.00 per night. Check in time: 3 pm

For More Information Contact:

| | | |
|------------------------------------|------------|--------------|
| Convention Chair: | Andy F. | 330-571-7493 |
| Convention Vice-Chair: | Chris G. | 216-209-5704 |
| Convention Secretary: | Brandin F. | 330-819-6945 |
| Convention Treasurer: | Mark T. | 216-403-9952 |
| Convention Information Chair: | Dnyelle M. | 330-979-5586 |
| Arts & Graphics Chair: | Zach W. | 330-604-8775 |
| Fundraising & Entertainment Chair: | Chris D. | 330-671-2044 |
| Hotels & Hospitality Chair: | Ruby K. | 216-240-0926 |
| Merchandise Chair: | Will M. | 440-813-3410 |
| Programming Chair: | Barry B. | 561-309-6048 |
| Registration Chair: | Jesse G. | 330-573-0772 |
| Special Needs: | Lee D. | 216-469-0583 |

Registration Forms and Cash or Check can be mailed to:

O.C.N.A XXXVIII
P.O. Box: 13331
Fairlawn, Ohio 44334

Registration Form

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Email: _____

List any Special Needs: _____

If registering more than one person, please list additional name(s) below:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Email: _____

| Basic Registration | Total | Full Registration | |
|----------------------------|----------|----------------------------------|----------|
| \$25.00 (until 01/31/22) | \$ _____ | \$80.00 (Before 02/28/22) | \$ _____ |
| \$30.00 (after 02/01/22) | \$ _____ | \$85.00 (After 02/28/22) | \$ _____ |
| \$55.00 Saturday Banquet | \$ _____ | | |
| Chicken _____ Salmon _____ | | Veg/Vegan _____ (Please Specify) | |

On Site Basic Registration: \$35.00

No Personal Checks on Site* *No Refunds

Full Registration Includes Friday & Saturday Night Dances
\$10.00 at Door w/o prior Registration

Newcomer Donation: Total \$ _____

Grand Total: \$ _____

Receipt # _____