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**March 26-29,
2020**



**The Westin
Pittsburgh**

Pre-Registration

Name _____

Address _____

City _____ State _____ Zip _____ Country _____

Phone _____ Email _____

Which fellowship are you a member of?

☐ AA ☐ Al-Anon ☐ Alateen

How would you like to stay informed?

☐ Email ☐ Snail Mail

Sobriety Date _____

Do you have any special needs? _____

I am attending EACYPAA XVIII _____ \$15.00

I would like to provide a scholarship donation for a newcomer to attend EACYPAA XVIII _____ \$

Please check any of the following options that interest you!

Total Amount Enclosed \$ _____

☐ I would like to be of service at EACYPAA!

☐ I would like to help outreach EACYPAA!

*All information provided on this registration form is for registration purposes only, and will be kept strictly confidential and protected by the EACYPAA Host Committee and its Advisory Council members.

Bid or Host Committee Affiliation for Pre-Registration Contest: _____