**77th National Convention Registration Form
The Hyatt Regency Washington on Capitol Hill, Washington, DC
August 22-26, 2022**



**The BVA National Convention is the one time each year that blinded and visually impaired veterans meet directly with VA Blind Rehabilitation Services leadership and other rehabilitation professionals to learn about and discuss new products, services, and technologies.**

**The Hyatt Regency Washington on Capitol Hill is offering rooms for $145.00 per night (plus a 14.95% state and local tax). The Hyatt Regency Washington on Capitol Hill offers complimentary standard Wi-Fi in guest rooms as well as use of their indoor pool and fitness center.**

**The hotel is offering complimentary airport transportation ONLY from the Ronald Reagan Washington National Airport (DCA) BY RESERVATION. Their shuttle service is being worked out at this time. More information will be presented at a future date.**

**While on property, enjoy Starbucks in their gift shop; breakfast, lunch and dinner in Article One; or snacks and drinks from the Article One Lounge.**

 **To reserve your room, please use the convention room booking link**[(CLICK HERE)](https://www.hyatt.com/en-US/group-booking/WASRW/G-BVET)**.  You can also call**(800) 233-1234**and use room block code “G-BVET” to make your room reservation. The room block rate is available from August 21st-27th, 2022.**

 **For travel assistance we encourage you to contact Brenda K. McDaniel (Independent Travel Consultant) and daughter of a BVA member. Please contact Brenda (between the hours of 11:00am – 6:30pm EST) via email at**brenda\_mcdaniel@sbcglobal.net**, or via telephone at**(915) 204-0101**.**

**Please complete the convention registration form. Should you require assistance completing this process contact BVA National HQ via email at**bva@bva.org**, or via telephone at**(800) 669-7079 x 304**.**

**2022 REGISTRATION FORM**

**FIRST NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MIDDLE NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **LAST NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**PRIMARY MAILING ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ APT: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **CITY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ STATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ZIP: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

COUNTRY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**PRIMARY EMAIL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PRIMARY PHONE NUMBER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**EMERGENCY CONTACT NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **EMERGENCY CONTACT PHONE NUMBER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**ARE YOU A BVA MEMBER:** YES□ NO□ **(Non-member fee is $210)**

**ARE YOU A MEMBER OF A REGIONAL GROUP: YES□ NO□
REGIONAL GROUP NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **T-SHIRT SIZE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**WILL YOU BE BRINGING A GUEST? YES□ NO□ *Guest fees are $125/person***

**GUEST NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ GUEST EMAIL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**GUEST T-SHIRT SIZE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**WILL YOU BE BRINGING A SERVICE DOG? YES□ NAME OF SERVICE DOG:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**DO YOU OR YOUR GUEST HAVE ANY FOOD RESTRICTIONS/ALLERGIES/MEDICAL ISSUES?**

**IF YES, PLEASE LIST: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**WILL YOU REQUIRE A WHEELCHAIR? YES□ NO□**

**WHICH OFFSITE EVENTS WOULD YOU BE INTERESTED IN?**

|  |  |  |
| --- | --- | --- |
| **EVENT** | **YES *(Please check all that you would be interested in)*** | **NO** |
| **Bowling** | □ | □ |
| **Bus Tours** | □ | □ |
| **Walking Tours** | □ | □ |
| **Kayaking** | □ | □ |
| **Scavenger Hunt** | □ | □ |

PLEASE LIST OTHER EVENTS YOU WOULD BE INTERESTED IN ATTENDING:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

WILL YOU REQUIRE AN OFFSITE GUIDE? Yes□ No□

**PAYMENT INFORMATION:** Registration fee is $125.00/person and $210 for non-members

□ My check made payable to Blinded Veterans Association is enclosed. Mail your check to Blinded Veterans Association, PO Box 90770 Washington, DC 20090: Contact BVA Convention Coordinator @ mbuonodagrossa@bva.org or call 202-371-8880 x 304 with any questions.

□ Charge my credit card: □ AMEX □ MasterCard □ VISA

Card Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Exp. Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CVV2 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Amount Authorized: $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name on Card (print): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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