

Date: _____

2019, March 17th E8PA Global Convention in Okinawa PARTICIPATION APPLICATION (FORM A) *Fill in FORM B for family members									
Applicant's Name (As on Passport)	First & Middle Name				Last Name				
Distributor ID & Rank	ID No.				Rank				
E8PA Membership	Do you have an E8PA membership card? YES / NO ← Circle one								
	If YES circle one →		BLACK	PLATINUM	GOLD	SILVER	BRONZE	CRYSTAL	(As of Mar 17th)
Mailing Address	Address								
	State / Province								
Contact Info	Country				Zip Code				
	[Home]				[Mobile]				
Email Address @									
Flight Info	Arrive in Okinawa: March _____, 2019				Depart Okinawa: March _____, 2019				
	Flight No.				Flight No.				
Global Convention (March 17th) *Please circle your ticket price	Admission Fee(USD)		E8PA Cardholder & immediate family members						
			Regular	Black 100% OFF	Platinum 80% OFF	Gold 60% OFF	Silver 40% OFF	Bronze 20% OFF	Crystal 10% OFF
	Application received by February 15th		\$150	\$0	\$30	\$60	\$90	\$120	\$135
	Application received by the end of February		\$200	\$0	\$40	\$80	\$120	\$160	\$180
Application received in March		\$300	\$0	\$60	\$120	\$180	\$240	\$270	
Golf Competition (March 16th) -optional- *Please circle	Will you participate in the golf competition on the 16th? YES / NO ← Circle one								
	Status	Regular			E8PA BLACK cardholders & Immediate family				
	Details	Inclusive of Participation (\$50)+ Transportation, Golf Awards & Dinner			FREE Participation + Transportation, Golf Awards & Dinner				
	Participation Fee(USD)	\$50			\$0				
"My Total"	_____ USD (17th Convention)		+	_____ USD (16th Golf Competition)		=	_____ USD "My Total"		
Meals (circle)	Regular				Halal				
Cancellations: by Feb 28 100% refund by Mar 10 50% refund after Mar 11 No Refund									
*Hotel Discounts & E-Point Redemption E8PA cardholders attending the Global Convention will be reimbursed for their hotel stay according to their E8PA membership status. Discount applies to a maximum of US\$200/night and up to 2 nights of lodging. Ex 1) Hotel: US\$275 Discount: (Black) 100% of maximum rate = USD\$200/night Ex 2) Hotel: US\$175 Discount: (Bronze) 20% of US\$175 = US\$35/night *E8PA members may redeem E-Points to use for travel expenses to the Convention. (1,000 E-Points = US\$1.00 or JPY100) To check your updated E-Point status go to https://information.enagic.com/mypage/login.php *To receive reimbursement or redeem E-Points, please present a copy of your receipts to your corresponding branch office.									

*E8PA discounts apply to immediate family members. *50% discount for children ages 6-12. *Please complete Form B for additional tickets.

Total No. of Tickets: Adults 13yrs + () 6 to 12yrs () under 6yrs ()

\$	_____ USD "My Total"	+	_____ USD Other Total (FORM B)	=	_____ USD Grand Total
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* I am submitting FORM A & _____ pages of FORM B.

ENAGIC INTERNAL USE ONLY	
Payment Received	(Month / Day / Year) _____ / _____ / _____ Branch: _____
Amount	Method (Circle): Card Check Cash Bank Staff: _____ USD

Date: _____

2019, March 17th E8PA Global Convention in Okinawa
PARTICIPATION APPLICATION (FORM B) *Must submit with FORM A

Applicant's Name (As on FORM A)	First & Middle Name	Last Name	Distributor's ID# / Rank (ID No. _____ / Rank <u> A </u>)
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*E8PA discounts are only applicable to immediate family members.

1	Name (As on Passport)	First & Middle Name	Last Name
	Guest Type	<input type="checkbox"/> Guest <input type="checkbox"/> Distributor (ID No. _____ / Rank <u> A </u>)	
	For immediate family members of E8PA Cardholders ⇒	Cardholder's ID No. _____	E8PA Cardholder's <input type="checkbox"/> Spouse <input type="checkbox"/> Child <input type="checkbox"/> Parent <input type="checkbox"/> Sibling
	Contact Info	[Home] _____	[Mobile] _____
	Meals	<input type="checkbox"/> Regular <input type="checkbox"/> Halal	
	Ticket Type	<input type="checkbox"/> Adults(13yrs +) <input type="checkbox"/> 6 to 12yrs (50%) <input type="checkbox"/> under 6yrs (FREE)	Total
	\$	Mar. 16 Convention US\$ _____ + Mar. 17 Golf US\$ _____ =	US\$ _____

2	Name (As on Passport)	First & Middle Name	Last Name
	Guest Type	<input type="checkbox"/> Guest <input type="checkbox"/> Distributor (ID No. _____ / Rank <u> A </u>)	
	For immediate family members of E8PA Cardholders ⇒	Cardholder's ID No. _____	E8PA Cardholder's <input type="checkbox"/> Spouse <input type="checkbox"/> Child <input type="checkbox"/> Parent <input type="checkbox"/> Sibling
	Contact Info	[Home] _____	[Mobile] _____
	Meals	<input type="checkbox"/> Regular <input type="checkbox"/> Halal	
	Ticket Type	<input type="checkbox"/> Adults(13yrs +) <input type="checkbox"/> 6 to 12yrs (50%) <input type="checkbox"/> under 6yrs (FREE)	Total
	\$	Mar. 16 Convention US\$ _____ + Mar. 17 Golf US\$ _____ =	US\$ _____

3	Name (As on Passport)	First & Middle Name	Last Name
	Guest Type	<input type="checkbox"/> Guest <input type="checkbox"/> Distributor (ID No. _____ / Rank <u> A </u>)	
	For immediate family members of E8PA Cardholders ⇒	Cardholder's ID No. _____	E8PA Cardholder's <input type="checkbox"/> Spouse <input type="checkbox"/> Child <input type="checkbox"/> Parent <input type="checkbox"/> Sibling
	Contact Info	[Home] _____	[Mobile] _____
	Meals	<input type="checkbox"/> Regular <input type="checkbox"/> Halal	
	Ticket Type	<input type="checkbox"/> Adults(13yrs +) <input type="checkbox"/> 6 to 12yrs (50%) <input type="checkbox"/> under 6yrs (FREE)	Total
	\$	Mar. 16 Convention US\$ _____ + Mar. 17 Golf US\$ _____ =	US\$ _____

4	Name (As on Passport)	First & Middle Name	Last Name
	Guest Type	<input type="checkbox"/> Guest <input type="checkbox"/> Distributor (ID No. _____ / Rank <u> A </u>)	
	For immediate family members of E8PA Cardholders ⇒	Cardholder's ID No. _____	E8PA Cardholder's <input type="checkbox"/> Spouse <input type="checkbox"/> Child <input type="checkbox"/> Parent <input type="checkbox"/> Sibling
	Contact Info	[Home] _____	[Mobile] _____
	Meals	<input type="checkbox"/> Regular <input type="checkbox"/> Halal	
	Ticket Type	<input type="checkbox"/> Adults(13yrs +) <input type="checkbox"/> 6 to 12yrs (50%) <input type="checkbox"/> under 6yrs (FREE)	Total
	\$	Mar. 16 Convention US\$ _____ + Mar. 17 Golf US\$ _____ =	US\$ _____

Grand Total
US\$ _____

* I am submitting _____ pages of FORM B.

ENAGIC INTERNAL USE ONLY		
Payment Received	(Month / Day / Year) _____ / _____ / _____	Branch:
Amount	Method (Circle): Card Check Cash Bank USD	Staff: