

49th PAA NATIONAL CONVENTION 2025

CRETAN VOICE

West Palm Beach, Florida

JUNE 18 - 22

REGISTRATION FORM

FIRST/LAST NAME

E-MAIL ADDRESS

ADDRESS

CITY

STATE, ZIP

HOME PHONE

CELL PHONE

PAA/PYA CHAPTER

Select if Applicable: PAA Member PAA Board Member PAA Chapter Officer PYA Member PYA Board Member PYA Chapter Officer

ADDITIONAL FAMILY MEMBERS ATTENDING:

FIRST/LAST NAME

Adult PYA Member Child

FIRST/LAST NAME

Adult PYA Member Child

FIRST/LAST NAME

Adult PYA Member Child

PLEASE SELECT YOUR PACKAGES

Packages include all evening events & picnic (visit www.cretanvoicewpb.com for optional events and excursions)

REGISTER BY:	ADULT PACKAGE	PYA PACKAGE Ages 15-29	CHILD PACKAGE Ages 6-14 (5 & under, free)
1/31/25	\$450.00	\$250.00	\$100.00
3/15/25	\$550.00	\$350.00	\$200.00
5/1/25	\$650.00	\$450.00	\$300.00

Total Amount Enclosed (Payable To: Cretan Voice)

\$

MAIL THIS FORM AND YOUR CHECK TO:

Cretan Voice
110 Southern Blvd
West Palm Beach, FL 33405

Hotel Accommodations:
West Palm Beach Marriott

1001 Okeechobee Blvd,
West Palm Beach, FL 33401
1(800) 228-9290

Special Group Rate - \$199 through January 31st
Mention: "49th PAA National Convention"

CONTACT INFORMATION:

www.cretanvoicewpb.com

561-351-6980 (Lee Esopakis)

wpb2025@pancretan.org



PANCRETAN ASSOCIATION OF AMERICA 2025 NATIONAL CONVENTION PROGRAM SPONSORSHIP FORM

Programs will be distributed at the convention

INSTRUCTIONS

Please supply images at 300 dpi in jpg file format. Please supply text in a Word Document.

If supplying a finished Ad, please provide High Res PDF. E-mail your files to wpb2025@pancretan.org. If you have questions, please call **Maria Plevrakis: 561-386-8572**

Please submit your contract and materials by **May 1, 2025** to:

Cretan Voice, 110 Southern Blvd, West Palm Beach, FL 33405

ADVERTISER'S INFORMATION:

Corporate/Chapter Name (if applicable):

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Last Name

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METHOD OF PAYMENT:

CHECK/MONEY ORDER

Please make payable to the "Cretan Voice"

CREDIT CARD

VISA Master Card Discover American Express

Credit Card Number

Expiration Date

Date

CVC / Security Number

Signature

RATE SCHEDULE:

- Back Cover \$1500 8.5" x 11"
- Inside Front Cover \$1000 8.5" x 11"
- Inside Back Cover \$1000 8.5" x 11"
- Full Page \$300 7.75" x 10.25"
- Half Page \$200 7.75" x 5"
- Quarter Page \$150 3.8125" x 5"
- PAA Friends \$50 Family Name Only Listing