



November 9-10, 2011

**Hyatt Harborside
Boston, MA**

Meeting Registration • \$195 per person

Name _____

Firm _____

Street Address _____

City _____ State _____ ZIP _____

Phone _____ FAX _____

Email _____

Names of additional staff and/or guests attending the meeting:

1. _____ Email _____

2. _____ Email _____

3. _____ Email _____

4. _____ Email _____

5. _____ Email _____

6. _____ Email _____

Total number of meeting registrants: _____ X \$195

\$ _____ TOTAL

Enclosed is a check for: \$ _____ **OR**

OR Register online at www.passengervessel.com

Please charge \$ _____ VISA MasterCard American Express DISCOVER

Card Number _____ Exp. Date _____

Name on Card _____



**Questions?
Call PVA 800-807-8360**

Register online at www.passengervessel.com or mail form with check to Passenger Vessel Association, 103 Oronoco Street, Suite 200, Alexandria, VA 22314 or FAX with credit card information to 703-518-5151