



## OCA Convention Member Information

Please use a separate form per person if airline information is different

Company:

Question:	Response
First and Last Name (Member)	
First and Last Name (Guest)	
First and Last Name (Guest)	
First and Last Name (Guest)	
First and Last Name (Guest)	

### Arriving into Aruba

Date Arriving	
Time of Arrival	
Airline into Aruba	
Flight # into Aruba	
Arriving from what city? (i.e., Los Angeles)	

### Departing from Aruba

Date Departing	
Time of Departure	
Airline leaving Aruba	
Flight # leaving Aruba	
Departing from what city? (i.e., Los Angeles)	

### For Information Below, Please Specify the Member or Guest Name

Is this your first convention?	
Food allergies? Please Explain	
Do you have special needs? (i.e., mobility)	
Notes / Special Requests	
Name and age if under 18	

### How to submit this form:

**EMAIL:** [drule@ohiocontractors.org](mailto:drule@ohiocontractors.org)

Partial submission is okay if you would like to send your airline information at a later date. Contact David rule @ 614-361-9144