Women’s Army Corps Veterans’ Association - Army Women United
2019 73rd National Convention
“Welcome Home, Army Women Remembering the Past and Looking to the Future”

Preliminary Agenda
National Convention 23-25 August 2019
Executive Board Meeting 21 August 2019
Board of Directors Meeting 22 August 2019
General Meetings 23-25 August 2019
Memorial Service 25 August 2019

Social Events
Welcome Reception 22 August 2019 @1800 hours
Company Party 23 August 2019 @1800 hours
Pallas Athena Luncheon 24 August 2019 @1300 hours
Presidents Luncheon 25 August 2019 @1300 hours

Crowne Plaza Hotel, 33 East Fifth Street, Dayton, Ohio 45402
Room rate is $124 plus tax, per night and the rate applies 3 days before and until 3 days after. Included
is a hot buffet breakfast and complimentary valet parking. Complimentary shuttle service to/from the
Dayton International Airport and needs to be scheduled with the hotel’s front desk a week before. There is
also a complimentary local shuttle that goes within a 5-mile radius of the hotel based on shuttle availability.
Reservations can be made by calling directly to the hotel reservation department Mon.-Fri. 8Am to 5PM
at 937-229-9835 or after business hours to Central Reservations at 800-689-5586 and you must identify
yourself when you make the reservation and request the group rate for the WOMEN’S ARMY CORP
VETERAN’S ASSOCIATION. All
reservations must be made by 12:01 AM on 20 July 2019. There are handicapped rooms available,
physical, hearing and sight. If you reserve a handicap room, please keep your conformation number to
 guarantee you room. Check in is 1500 hrs. and check out is 1200 hrs.
If you need to rent a scooter or wheelchair contact Med Mart at: 1- 800-877-1359.

Crowne Plaza Hotel Amenities Include:
• 287 rooms featuring refrigerators and flat screen TV, bed has a pillow top mattress.
• Service animals allowed
• Pets allowed with a $75 nonrefundable deposit
• Wi-Fi
• Pool
• Valet Laundry Services
• ATM Banking Computer Station Exercise Room
• Safe deposit box at front desk

Attractions
• Carillon Historical Park America’s Packard Museum Dayton Art Institute
• 2nd Street Market
• National Museum of the U.S.A.F. at Wright Patterson A.F.B. free admission
• Historic Oregon District within walking distance and has many little shops and restaurants.
• Casinos are in the area---Cincinnati, Dayton, and on the Ohio River in IND.
• Cincinnati Reds Ball Park is an hour away
• National Veterans Museum in downtown Columbus, OH. on West Broad St. free admission to all veteran’s
• Schuster Performing Arts Victoria Theatre

Come and join us in Dayton, Ohio at the Crowne Plaza Hotel. The hotel is having a reception for us on
Thurs. (22nd) evening. The Company Party on Fri. night (23rd) will be a sock hop so bring your poodle skirts,
booby socks, and your saddle oxfords. For those of you who don’t know what a sock hop is, years ago in
50’s and 60’s after a ball game at school they would have a dance in the gym, but you could not wear your
shoes on the gym floor and we danced in our socks, therefore a sock hop. Our speaker for the Pallas
Athena Luncheon on Sat.(24th) will be Maj. Gen. Tammy Smith from Ch. 33 and she will tell about her
recent tour of South Korea.
2019 73rd National Convention
“Welcome Home, Army Women Remembering the Past and Looking to the Future”
INDIVIDUAL National Convention Registration Form (PAGE 1 of 2)

Name: ___________________________________ Is this your first WACVA-AWU Convention: Yes or No

Address: ____________________________________________ Street __________ City __________ State & Zip Code __________

Email Address: __________________________ Phone No: __________

Chapter Number: __________ or MAL: __________ Member of Honor Guard: __________

Emergency Contact Name & Relationship: __________________________ Phone No.: __________

Check only ONE of the following. I am attending the 2019 National Convention as a:

☐ National Officer, Title: ______________
☐ Past National President
☐ Immediate National President
☐ Natl Standing Committee Chair, Committee Name: ______________
☐ Honor Guard Captain
☐ Chapter President. If Chapter President’s Representative, check here ☐.
☐ Chapter or member-at-large (MAL) Delegate (Cannot be both chapter and MAL delegate—one only). Indicate Chapter or MAL ______________
☐ Chapter Alternate
☐ Chapter or MAL Member. If Chair of MAL Delegation, check here ☐.

Are you carrying a PROXY VOTE? __________ Name of member(s) not attending (you may carry up to two):
1. ____________________________ 2. ____________________________

Number of Guests: _____ Names of Guests: __________________________________________

SELECT YOUR MEAL CHOICES FROM BELOW:

*Company Party (Friday, 23 August 2019, 1800 hours)
- Prime Rib $38.00 ________ $____
- Grilled Salmon $34.00 ________ $____
- Grilled Chicken $32.00 ________ $____
- Vegetarian Option $32.00 ________ $____

*Pallas Athene Luncheon (Saturday, 24 August 2019, 1300 hours)
- Pasta Primavera $23.00 ________ $____
- Rosemary Lemon Chicken $26.00 ________ $____
- London Broil $33.00 ________ $____

*Presidents Luncheon (Sunday, 25 August 2019, 1300 hours)
- Roasted Vegetable Wrap $27.00 ________ $____
- Chicken Salad Sandwich $27.00 ________ $____
- Roast Beef Sandwich $27.00 ________ $____

Registration Fee Must Be Paid By All Members Attending __________________________ $____

Registration Late Fee, If Paid After 20 July 2019 $15.00 $____

PROXY vote for Chapter Member (if you carry a proxy) each is $10.00 ________ $____

Date sent: __________________________ Total Enclosed: $____
Make your check for total amount payable to WACVA-AWU 2019 CONVENTION FUND.

Mail Check with INDIVIDUAL REGISTRATION FORM(S) TO—

Bethany Carpenter (Convention Treasurer and Registration)
650 1/2 Chestnut Street
Marysville, OH 43040

*Please note, send a copy of Individual Registration Forms to:
Joe Ann CV Gaytan (Credentials Chair)
6504 Lexis Street
Amarillo, TX 79119

ADDITIONAL INFORMATION:

Any allergies to FOOD and/or MEDICATIONS list here: ________________________________
Listing food allergies helps the kitchen staff ensure the paid attendees have their correct food choices and dietary restrictions.

EMERGENCY CONTACT INFORMATION

Name: ________________________________
Relationship: ________________________________
Phone Number: ________________________________ Cell Number: ________________________________

MEAL INFORMATION FOR GUESTS

Check one: ❑ Guest ❑ Honorary Member ❑ Mother of Member ❑ Daughter of Member
Name: ___________________________________ Name of WACVA-AWU Member: ________________________________

Guest Address: ________________________________

Meals attending & menu choice:
❑ Friday (menu choice ________________________________),  
❑ Saturday (menu choice ________________________________), 
❑ Sunday (menu choice ________________________________)

Check one: ❑ Guest ❑ Honorary Member ❑ Mother of Member ❑ Daughter of Member
Name: ___________________________________ Name of WACVA-AWU Member: ________________________________

Guest Address: ________________________________

Meals attending & menu choice:
❑ Friday (menu choice ________________________________),  
❑ Saturday (menu choice ________________________________),  
❑ Sunday (menu choice ________________________________)

Check one: ❑ Guest ❑ Honorary Member ❑ Mother of Member ❑ Daughter of Member
Name: ___________________________________ Name of WACVA-AWU Member: ________________________________

Guest Address: ________________________________

Meals attending & menu choice:
❑ Friday (menu choice ________________________________),  
❑ Saturday (menu choice ________________________________),  
❑ Sunday (menu choice ________________________________).
From: CHAPTER (Name & No.) DATE: ________________________________

TO: Bethany Carpenter (Treasurer) (copy only to) Joe Ann CV Gaytan, Credentials

650 1/2 Chestnut Street
Marysville, OH 43040

6504 Lexis Street
Amarillo, TX 79119

Name of Chapter President (for current year ending 30 June): __________________________________________________________

Chapter President WILL ❑ or WILL NOT ❑ be attending The National Convention. If not attending, the Chapter President Representative will be _________________________________.

Will Chapter President be attending in another capacity (National Officer or Standing Committee Chair): YES or NO

***** DELEGATES TO NATIONAL CONVENTION *****

CHAPTER DELEGATES

1. __________________________________________________
2. __________________________________________________
3. __________________________________________________
4. __________________________________________________
5. __________________________________________________
6. __________________________________________________
7. __________________________________________________
8. __________________________________________________
9. __________________________________________________
10. _________________________________________________

CHAPTER ALTERNATES

1. __________________________________________________
2. __________________________________________________
3. __________________________________________________
4. __________________________________________________
5. __________________________________________________
6. __________________________________________________
7. __________________________________________________
8. __________________________________________________
9. __________________________________________________
10. _________________________________________________

Signed by Chapter President or Secretary (specify which):

1. __________________________________________________
2. __________________________________________________
3. __________________________________________________
4. __________________________________________________
5. __________________________________________________
6. __________________________________________________
7. __________________________________________________
8. __________________________________________________
9. __________________________________________________
10. _________________________________________________

NOTE: Indicate if the delegate or alternate will have a proxy vote. Remember—Each proxy vote is $10.00.

********** PROXY **********

Please be advised ___________________________________________ Delegate

(Name of person NOT attending National Convention)

Appoints the following as my Proxy, to vote and act in my name at all meetings and on all matters that are authorized by the National Bylaws, with the same effect as if I were personally present. (This is for the current convention year only.)

Appointed member holding Proxy: ___________________________________________

(Name of person attending National Convention)

Proxy Holder will be attending the National Convention as a—

❑ Chapter Delegate
❑ Chapter President or her Representative
❑ National Officer or National Standing Committee Chair from my Chapter

I also hereby revoke any Proxy or Proxies heretofore given by me to any person for previous conventions.

Signed: ________________________________ Date: ________________________________
Please send a separate check payable to **WACVA-AWU Convention Fund** for your black-and-white advertisement, an electronic copy of the advertisement, and this form.

<table>
<thead>
<tr>
<th>Mail check and this form to—</th>
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<tbody>
<tr>
<td>Bethany Carpenter</td>
</tr>
<tr>
<td>Convention Treasurer</td>
</tr>
<tr>
<td>650 1/2 Chestnut Street</td>
</tr>
<tr>
<td>Marysville, OH 43040</td>
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<tr>
<td><a href="mailto:bthnycarpenter@yahoo.com">bthnycarpenter@yahoo.com</a></td>
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<tr>
<th>Email advertisement (camera-ready electronic file, .jpg, .png, .tif) to—</th>
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</thead>
<tbody>
<tr>
<td>Darlene Hemmingsen</td>
</tr>
<tr>
<td>2019 Convention Book Editor</td>
</tr>
<tr>
<td>(C) 740-919-4267 or <a href="mailto:ameliaelec@aol.com">ameliaelec@aol.com</a></td>
</tr>
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<td><strong>Deadline is 15 June 2019</strong></td>
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Check desired advertisement to—

- $100.00 Full-Page (B&W) Advertisement (8 ½ × 11 in.)
- $50.00 Half-Page (B&W) Advertisement (4 ¼ × 5 ½ in.)
- $25.00 Quarter-Page (B&W) Advertisement—Vertical
- $25.00 Quarter-Page (B&W) Advertisement—Horizontal
- $15.00 Business Card (B&W)—Personal or Company

Additional instructions or verbiage—

WACVA-AWU National Convention Advertisement Checklist

- Check and Advertisement Order Form mailed to Convention Treasurer
- Camera-ready copy of advertisement (.jpg, .png, .tif, etc.) emailed to Convention Book Editor

**Amount Enclosed $ _____________**