



Hawaii University International Conferences
SPONSOR & EXHIBITOR REGISTRATION FORM
2026 STEM/STEAM and Education Conference June 9, 10 & 11, Honolulu, Hawaii
Prince Waikiki Resort

For Mailing or Fax in registration: Please complete all sections of this form, send in by regular mail to P.O. Box 29056, Honolulu, Hawaii 96820 or fax to: 1-808-847-4288. Once received, we will acknowledge it by e-mail. For any questions, contact us at office phone: 1-808-537-6500

<input type="checkbox"/> Exhibitor <input type="checkbox"/> Sponsor		
Company's Name:		
Company's Official Contact Name:		
Designation:		
E-mail Address:		
Mailing Address:		
City:	State:	Zip/Postal Code:
Country:	Best Contact/Phone:	
Conference Exhibitor/Sponsor Registration Fees: <input type="checkbox"/> 1. Tier I: US\$500.00 (Includes 1 Breakfast on June 9, 2026) <input type="checkbox"/> 2. Tier II: US\$1,000.00 (Includes 2 Breakfasts on June 9, & 11, 2026) <input type="checkbox"/> 3. Tier III: US\$2,000.00 (Includes 2 Breakfasts on June 9, & 10, & 1 Lunch on June 11) <input type="checkbox"/> Additional Breakfast @ \$56.00 each Number/s of Additional Breakfast: _____		
<input type="checkbox"/> Additional Lunch @ \$65.00 each		Number/s of Additional Lunch: _____
Deadline for Registration: May 31, 2026 Confirmation of participation is by payment only.		Sub Total: _____

Check/Cheque (No personal account): Please make check/cheque payable in US\$ only to: **"Hawaii University International Conferences"** (Federal ID #27-3464653) and mail it with your completed registration form to **Hawaii University International Conferences, P.O. Box 29056, Honolulu, HI 96820.**

Credit cards: for faxing and mailing in registration: Visa Mastercard

Please charge the total amount/payment: (including payment for additional breakfast and lunch)		Total Amount US\$: _____	
Card #: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Expiration Date: <input type="text"/> <input type="text"/>	*CCV#: <input type="text"/> <input type="text"/>	
Name on card:		Signature:	

* This is a 3-digit security number written on the backside of your credit card.

For Official Use Only:	Received on: _____	Recorded by: _____
Check #: _____	Amount: _____	
Reference #: _____		