

REGISTRATION FORM

Name: _____
Address: _____

City: _____
State: _____
Zip: _____
Phone: _____
Email: _____

(Please completed reverse side)

METHOD OF PAYMENTS:

Credit Card No: _____
Expiration Date: _____
CVC (three digit code): _____

Mail To:
SWACNA XV
P.O. BOX 429
Wilmington, DE 19808
or
Register On-Line at
www.smallwonderarea.org

CHILDREN 10 YEARS OR OLDER
MUST BE REGISTER



SMALL WONDER AREA CONVENTION
NARCOTICS ANONYMOUS

MARCH 8 - 10, 2024

HOTEL INFORMATION

CHASE CENTER
ON THE RIVERFRONT

&

The Westin
Wilmington

818 Shipyard Drive
Wilmington, DE 19881
(302) 654-2980

Room Rates are \$164.00 per night.
Call and mention SWACNA 2024 to
receive the discounted rate.

For more information, contact any of the
SWACNA XV Committee Members:

Chair: Geraldine W. 267-456-7346
Co-Chair: Cheryl E. 484-321-1557
Registration: Jess C. 302-988-7293
Programming Chair: James T. 904-788-3184

SmallWonderArea.org



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