



VVA Region 6 Meeting

June 3 & 4, 2016
Holiday Inn Hotel & Suites
75 South 37th Avenue St. Cloud, MN 56301
(844) 550-8894 (320) 253-9000

TENTATIVE AGENDA

June 3rd Friday –

Please Note: Registration will open Friday morning at 9:00 A.M. and will be available throughout the day. **Planing on attending museum tour** please plan on arriving by 12:00 P.M. (Noon)

1:00 P.M.- Bus leaves for the **Minnesota Military Museum at Camp Ripley** - bus ride is limited to first 50 on board. A \$5.00 admission will be collected as you board the bus. Others are welcome to carpool to the museum. Please inform Mike Demske so he has the correct count and the \$5.00 admission fee.

4:30 P.M.– Return to Holiday Inn
5:00 P.M.– Buffet Dinner at hotel (Cost included in registration fee)

June 4th Saturday

Registration: Registration will open at 8:00 A.M. and will be until 9:00 A.M.

8:30 A.M. Meeting rooms open
9:00 A.M. Meeting **Called to Order** – Prayer by Chaplain Leroy Kieke



**VVA National President and Treasurer
John Rowan and Wayne Reynolds**
Discussing **The Direction of VVA**
Open Question and Answer Period



11:30 A.M. Break for lunch (Deli at hotel on your own.)
12:30 P.M. Meetings resume
2:30 P.M. Agent Orange Town Hall Meeting (Maynard Kaderlik)
3:30 P.M. Hepatitis-C Awareness Meeting (Leroy Kieke and Hep-C Staff)
4:30 P.M. Move to Lake George (maps will be provided)
5:00 P.M. Texas Road House meal at Pavilion (Provided by Hep-C for registered guests only)
6:00 P.M. Walk to **Vietnam Memorial** (Complimentary photos by VVA Chapter 290). Free time at Memorial.

June 5th Sunday
Open



VVA Region 6 Meeting Registration Form

June 3-4, 2016
St. Cloud, MN

PLEASE PRINT



Date: _____

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Have you reserved a room at the Holiday Inn? Yes No

Are you sharing a room with another VVA member?
If yes, name of member: _____ Yes No

Are you sharing a room with a spouse or guest?
If yes, name of spouse or guest: _____ Yes No

Reservation:

- \$25.00 **Early Registration** postmarked or received by May 15th
- \$35.00 **Registration** received May 16th and later

Number of people attending, including yourself: _____
Fee per ⇨ \$ _____
Number ⇨ _____
Total Due ⇨ \$ _____

On the back of this Registration Form list the names of everyone registering for the Meeting or meals, including yourself.

Please tear off the Registration Form and mail the form along with your check to:

**VVA Chapter 290
P.O.Box 7004
St. Cloud, MN 56302**