



AHEPA SUPREME CONVENTION EVENT REGISTRATION

PLEASE FILL OUT **ONE** FORM PER PERSON

YOU MUST BE REPORTED BY YOUR CHAPTER AS A DELEGATE/ALTERNATE TO REGISTER AS ONE

JULY 26 - 31 2026 • PHILADELPHIA, PA.
CELEBRATING 250 YEARS OF THE UNITED STATES OF AMERICA

NAME: _____ CHAPTER: _____ DISTRICT: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: _____ EMAIL: _____

I AM A MEMBER OF: AHEPA DOP SOP/MOA MEMBERSHIP ID: _____

I AM REGISTERING AS A: DELEGATE ALTERNATE GUEST

PLEASE NOTE EARLY BIRD FEES APPLY IF PAID BEFORE JUNE 26, 2026

AHEPA & DOP PACKAGES INCLUDE: Opening Ceremonies, American Bandstand Party, America the Beautiful Reception, Athletic Luncheon, AHEPA Celebrates America 250, AHEPA Family Awards Brunch, DOP Salute to Women, AHEPA Greek Night Dance on Battleship, Grand Banquet & Ball, America 250 Years Celebration Dance Party

AHEPA DELEGATE/ALTERNATE	\$400 (\$500 AFTER JUNE 26 OR ON SITE)	\$ _____
DOP DELEGATE/ALTERNATE	\$400 (\$500 AFTER JUNE 26 OR ON SITE)	\$ _____
AHEPA/DOP NON DELEGATE / GUEST	\$475 (\$575 AFTER JUNE 26 OR ON SITE)	\$ _____

SOP & MOA PACKAGES INCLUDE: Opening Ceremonies, American Bandstand Party, America the Beautiful Reception, AHEPA Celebrates America 250, AHEPA Awards Brunch, DOP Salute to Women, SOP & MOA Celebrate the Youth Awards, AHEPA Greek Night Dance on Battleship, America 250 Years Celebration Dance Party

SOP DELEGATE/ALTERNATE	\$200 (\$250 AFTER JUNE 26 OR ON SITE)	\$ _____
MOA DELEGATE/ALTERNATE	\$200 (\$250 AFTER JUNE 26 OR ON SITE)	\$ _____
SOP/MOA NON DELEGATE / GUEST	\$240 (\$340 AFTER JUNE 26 OR ON SITE)	\$ _____

DEADLINE: JUNE 26, 2026

ADD \$10 IF PAYING BY CREDIT CARD: \$ _____

Forms & fees MUST be received via mail, fax, or email by Friday, June 26, 2026. **NO REFUNDS WILL BE ISSUED** after this date.

I HAVE ENCLOSED CHECK NO.: _____ TOTAL ENCLOSED: \$ _____

Please note that this form is for your convention registration package **ONLY**. In order to be seated as a delegate or alternate, your Chapter must have reported you by the **MAY 1, 2026** deadline with the Chapter Delegate/Alternate reporting form.

CHARGE MY: VISA MASTERCARD AMEX

CARD NO.: _____

EXPIRATION DATE: _____ CVV: _____ BILLING ZIP: _____

If you have not been reported, you will be required to pay the guest registration price.

SIGNATURE: _____