



Attendee Registration Form

First Name:		Last Name:		Nickname or Name on Badge:	
Title:			Phone:		
Organization:					
Street Address:					
City:		State/Province:		Postal Code:	
Email (required to receive Symposium Materials):					
Bar State(s) (Required for CLE credits):			Bar Number(s) (Required for CLE Credits):		
Dietary Restrictions (check all that apply): <input type="checkbox"/> Vegetarian <input type="checkbox"/> Vegan <input type="checkbox"/> Kosher <input type="checkbox"/> Gluten-Free			Food Allergies?		
ADA or Special Needs?			Emergency Contact & Phone Number:		

FULL SYMPOSIUM REGISTRATION RATES *Includes Sunday Reception, Monday Reception, Tuesday Luncheon & Reception*

NCSEA ID # _____

NCSEA Member Fees:

- \$655 - Regular
- \$510 – Host & Neighboring States (AZ,CA,CO,NM,NV,UT)

Non-Member Fees*:

- \$775 - Regular
- \$630 - Host & Neighboring States (AZ,CA,CO,NM,NV,UT)
- \$545 - International Attendee

***Become an Individual Member today & pay the member symposium fee!**

- \$100 – Individual membership annual fee

DAILY SYMPOSIUM REGISTRATION FEES for Members & Non-Members: \$375

Please indicate which day you will be attending: Monday Tuesday Wednesday

Registration Cancellation Policy: NCSEA is unable to accept telephone or verbal cancellations. To cancel your registration, please provide written notice to the attention of the Symposium Registrar and send via email (registrations@ncsea.org), fax (703-506-3266) or mail (NCSEA – Attn: Leadership Symposium Registration; 7918 Jones Branch Drive, Suite 300, McLean, VA 22102) **no later than July 5, 2017 to receive a 50% refund of your registration fee.** NCSEA regrets that Event registration fees cannot be credited to a future NCSEA Event. **No refunds will be issued after July 5, 2017.**



NCSEA Registration Information and Policies

Registration Payment Policy: Registration payment MUST be received in full before an attendee will be able to attend the Event. If an attendee is submitting registration payment by mail or fax (credit card payments only), the **payment must arrive at the NCSEA office no later than Friday, July 21, 2017**. Attendees whose payments are not received by July 21 must bring payment to the Event in order to complete the registration process.

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NOTE: Due to Event demands, refunds may not be processed until after the Event has occurred.

Substitution Policy: Full Event registrations **may not** be shared by multiple individuals during the Event. Substitution of registrants may only occur if the original registrant is unable to attend. **Substitutions must be submitted to the Registrar in writing (via email, fax or mail) by Friday, July 21, 2017.** If the substituted individual falls into a different registration rate category, s/he will be charged the difference, or a refund will be issued.

Photo/Video Disclaimer: By attending the Event, the attendee acknowledges that photographs and/or videos including the attendee's likeness may be taken by NCSEA staff, event photographers or NCSEA-approved parties at any time. Furthermore, by registering for the Event, the attendee grants NCSEA permission to use photographs and/or video including the attendee's likeness in any type of NCSEA-approved media, including websites and print publications, without compensation or reward.

The undersigned has read and accepts the terms and conditions above:

Name (print): _____

Signature: _____

Date: _____

PAYMENT INFORMATION

TOTAL AMOUNT DUE	PAYMENT FORM
<p>Symposium Registration Fee*: \$ _____</p> <p>Individual Membership Fee: \$ _____</p> <p>\$75 CLE Credit Processing Fee: \$ _____</p> <p>(Required to receive CLE credit)</p> <p><i>*If bringing a guest, individual tickets are available for receptions. Contact registrations@ncsea.org for more information</i></p> <p style="text-align: right;">TOTAL \$ _____</p>	<p><input type="checkbox"/> Check payable to NCSEA <input type="checkbox"/> VISA <input type="checkbox"/> MC <input type="checkbox"/> AMEX <input type="checkbox"/> DISC</p> <p>Check or CC #: _____</p> <p>Expiration Date: _____</p> <p>Name on Card: _____</p> <p>Signature: _____</p> <p>Billing Address: _____</p> <p>Billing Zip Code: _____</p>

Return Form & Payment by Friday, July 21, 2017 to:

NCSEA, Symposium Registrar, 7918 Jones Branch Drive, Suite 300, McLean, VA 22102
 Fax: 703-506-3266 Attn: NCSEA Symposium Registrar, or email: Registrations@ncsea.org
Questions? Contact NCSEA at 703-506-2880 or Registrations@ncsea.org

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