

2018 NACC CONFERENCE - UNIVERSITY OF ARIZONA MEMBER REGISTRATION FORM

Please type or print clearly

Please make photocopies of this form for additional member conference registration.

**** Everyone Registering for the Conference must have paid the 2017-2018 membership dues. ****
Online Conference Registration will be available starting August 2017

Name: _____

Title: _____

University: _____

Address: _____

Address: _____

City: _____ St: _____ Zip: _____

Phone: _____

Fax: _____

E-mail: _____

Web site URL: _____

(circle one)

Small / Medium / Large Concession Operation:
T-Shirt Size Circle one (S M L XL 2XL 3XL)

Fees:

Membership _____ @ \$150
Conference Bundle **by** 9/15/17 _____ @ \$500
Member registration **after** 9/15/17 _____ @ \$450
Member spouse _____ @ \$600
Tombstone & Cavern Tour _____ @ \$125 each

Total conference Fee: \$ _____

Is this your first conference? ___ Yes, ___ No

Do you have special dietary needs? ___ Yes, ___ No

If yes, please explain: _____

Total Payment: \$ _____

___ Check enclosed, make payable to: **NACC**

___ Visa, ___ M/C, ___ AmEx

Card Holder Name: _____

Card Number: _____

Exp. Date: _____ Zip Code: _____

CVC (V, MC 3 digit, AMX 4 digit): _____

Signature: _____

Card Holder Phone: _____

Email: _____

(For receiving credit card receipt)

Name: _____

Title: _____

University: _____

Address: _____

Address: _____

City: _____ St: _____ Zip: _____

Phone: _____

Fax: _____

E-mail: _____

Web site URL: _____

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If yes, please explain: _____

For additional information contact:

Theresa Traulsen
Executive Director, NACC
(206) 440-9203
(206) 440-9213 Fax
info@NACC-Online.com
www.NACC-Online.com

Check www.NACC-Online.com for more Information.

Remember: If you register and payment is received by March 1, 2018 you will be entered into the drawing for a four night hotel stay for the 2019 conference.

Mail to:
NACC
16022 26th Ave NE Shoreline, WA 98155-6406