

SERVICE PROVIDER REGISTRATION FORM

| ATTENDEE REGISTRATION | Early-Bird Registration Fees (through April 15) | Late Registration Fees (after April 15 or onsite) |
|--------------------------------|--|--|
| <input type="radio"/> Attendee | \$1,025/per person | \$1,225/per person |
| <input type="radio"/> Speaker | \$1,025 per speaker *CorPERS members receive one complimentary speaker per enhanced membership level. | |

Is this your first time attending ACE? Yes No

(Please print clearly)

Organization Name: _____

First Name: _____ Last Name: _____

Title: _____

Preferred Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Daytime Phone: _____ Fax: _____

E-mail Address*: _____

**Please provide your e-mail address for conference updates and registration confirmation.*

| GUEST REGISTRATION | Early-Bird Registration Fees (through April 15) | Late Registration Fees (after April 15 or onsite) |
|---|--|--|
| <input type="radio"/> Guest Registration | \$155/person | \$205/person |
| <input type="radio"/> Children 12 and Under | \$50/person | \$100/person |

A *guest* refers to a spouse or personal friend, not a business associate, staff member, or colleague. All guests must be registered to attend NCPERS events. See general information page for more details.

First Name: _____ Last Name: _____

First Name: _____ Last Name: _____

REGISTRATION/ORDER SUMMARY

Attendee Registration \$ _____

Speaker Registration \$ _____

Guest Registration \$ _____

GRAND TOTAL (U.S. funds) \$ _____

PAYMENT (All payments must be in U.S. funds)

Online at www.ncpers.org.

You will need your username and password to log in.

Check

Mail to NCPERS
444 North Capitol Street, NW, Suite 630
Washington, DC 20001

Credit Card: Fax to 202-624-1439 or e-mail to registration@ncpers.org.

American Express  Visa  MasterCard 

Credit Card #: _____

Expiration Date: _____ Card Verification Code: _____

Name (on the card): _____

Billing Address: _____

City: _____ State: _____ Zip: _____

Charge: \$ _____

Signature: _____

By submitting this form, I certify I have read and understand the terms of this registration. If paying by credit card, I authorize NCPERS to charge my card for the total amount indicated.

REGISTRATION CANCELLATION POLICY

All registration cancellations must be received in writing before April 15 to receive a refund and will be subject to a \$100 processing fee for ACE registrations and a \$50 fee for guest registrations. **No refunds will be given to cancellations after April 15 or to no-shows.** Please e-mail your cancellation request to registration@ncpers.org.

For updates or to register online, visit www.NCPERS.org/ACE. Question? Call 202-624-1456 or e-mail registration@ncpers.org.