

Full Name Mr/s: _____

Badge Name: _____ **Title:** _____

Organization: _____

Address: _____

City: _____ **State:** _____ **Zip/Postal Code:** _____ **Country:** _____

Phone: _____ **Fax:** _____ ***Email:** _____

**Automated confirmation letter will be sent to this email. If you want confirmation sent to an additional email address, please list here:* _____

Registration Fees (fees are in U.S. dollars)

	Early Bird Rate Until April 6	Regular Rate After April 6	Late Rate After April 25
Member	<input type="checkbox"/> \$825	<input type="checkbox"/> \$900	<input type="checkbox"/> \$1,000
Non-Member	<input type="checkbox"/> \$1,220	<input type="checkbox"/> \$1,350	<input type="checkbox"/> \$1,450
U.S. Federal Gov't	<input type="checkbox"/> \$475	<input type="checkbox"/> \$475	<input type="checkbox"/> \$475

ADA: ☐ Please check here if you require assistance in order to fully participate in this meeting.
Email your specific requirements to meetings@aci-na.org.

☐ I require special dietary needs. Send an email to meetings@aci-na.org to describe how we can be of assistance.

☐ **CHECK** enclosed made payable to ACI-NA (U.S. dollars drawn from a U.S. bank)

Mail checks with this form to: **ACI-NA P.O. Box 5007 Client ID 500022 Merrifield, VA 22116-5007**

☐ **CREDIT CARD:** ☐ VISA ☐ MasterCard ☐ American Express Total Amount: \$ _____

Card Number: _____ Expiration Date: ____ / ____

Name as it appears on card: _____

Signature: _____

The card holder's signature above authorizes ACI-NA to charge the credit card the total correct amount due.

Fax credit card payments to (202) 478-0889

Registration Options



www.aci-na.org



Fax credit card
payment to
(202) 478-0889



Mail check payment to

ACI-NA
P.O. Box 5007
Client ID: 500022
Merrifield, VA 22116-5007

CONSENT TO USE OF PHOTOGRAPHIC IMAGES: Registration and attendance at, or participation in, ACI-NA's meetings and other activities constitutes an agreement by the registrant to ACI-NA's use and distribution (both now and in the future) of the registrant or attendee's image or voice in photographs, videotapes, electronic reproductions and audiotapes of such events and activities.

BADGES: Only individuals who register and present badges and/or tickets may attend conference events. A badge is required for all conference sessions.

PAYMENT: Full payment must accompany registration forms in order to complete a registration. Registrations will be processed at the registration rate available when payment is received. Credit card payment must be included for online and faxed registrations. Check payment will only be accepted with mailed forms and onsite registration forms. The card holder's signature authorizes ACI-NA to charge the credit card the total correct amount due and acknowledges there are no refunds after, **Wednesday, April 6, 2016.**

CONFIRMATION OF REGISTRATION: Confirmation of registration will be e-mailed to conference attendees using the e-mail address(es) provided above. If confirmation is not received within two weeks after sending in your registration form, please e-mail meetings@aci-na.org. Non-receipt of confirmation before the conference is not justification for seeking a refund.

CANCELLATION/REFUND POLICY: Notice of cancellation must be submitted in writing to meetings@aci-na.org. Cancellation notices received by **Wednesday, April 6, 2016** are subject to a \$100 processing fee and will be processed after the meeting takes place. **There are no refunds after the deadline date.** No refunds for no shows, however substitutions will be honored at any time.

NOTE: ACI-NA reserves the right to cancel this program at anytime. In that event, we will notify all registrants and refund the registration fee in full. However, any costs incurred by the registrant, such as hotel cancellation or airline penalties, are the responsibility of the registrant.

OPT-OUT: By registering for the conference you are providing permission to receive e-mails, mailings and faxes related to the conference. If you do not wish to receive any further emails from ACI-NA, please send a reply email to: memberservices@aci-na.org with the words "OPT-OUT" in the subject line with the original email in the body. You may notify us with your decision to opt-out within 30 days of receiving the email. *Please note, if you choose to opt out of receiving email from ACI-NA, you will no longer receive ACI-NA e-newsletters, notices of upcoming meetings, sponsorship opportunities, etc.* If you prefer to unsubscribe from certain electronic publications rather than opt-out from email communications entirely, please email such request to communications@aci-na.org. It may take up to 10 days to process your request. The postal address for ACI-NA is 1615 L Street, N.W., Suite 300, Washington, DC 20036. 202-293-8500.