

# **Virtual Conference Site Registration Form**

Small Business January 22, 2015 12:00рм-4:00рм (Eastern)

How Many Sites Will Be Participating?					
Select One	Number of Sites	Site Costs - NCMA Member		Site Costs - Nonmember	
		On or Before Jan 8	Regular Rate	On or Before Jan 8	Regular Rate
	1 site	\$200	\$225	\$245	\$265
	2 sites	\$400	\$450	\$490	\$530
	3 sites	\$600	\$675	\$735	\$795
	4 sites	\$800	\$900	\$980	\$1,060
	Other (Please Specify)	\$200 Per Site	\$225 Per Site	\$245 Per Site	\$265 Per Site

#### Site Registrant Information (Print Clearly)

Use second page to list additional sites—each site must have full registrant information.

NAME		NCMA MEMBER #
	000000000000000000000000000000000000000	
TITLE	ORGANIZATION	
ADDRESS		SUITE/APT.#
	OTATE	210
CITY	STATE	ZIP
PHONE NUMBER (WORK)	FAX NUMBER	

E-MAIL (REQUIRED FOR CONFIRMATION)

#### **Payment Method**

Check Enclosed (Payable to NCMA) Check No.	American Express	Discover	MasterCard	🗋 Visa
CREDIT CARD NUMBER		EXP. DATE	TOTAL A	MOUNT
NAME ON CARD				
SIGNATURE				
Payment must be made at the time of registration. NCMA accepts MasterCard, Visa, American Express, Discover, and personal/company checks (NCMA does not accept purchase orders). Registration must be received by January 22, 2015.				

Registration form can be e-mailed, faxed, or mailed to NCMA prior to the event date. See the virtual conference Web site for online registration: www.ncmahq.org. E-mail memberservices@ncmahq.org Subject line: SBVC Registration

Update My Contact Information

Fax it in! (703) 448-0939 Attn: SBVC Registration

Mail it in! NCMA Attn: SBVC Registration 21740 Beaumeade Circle Suite 125 Ashburn, VA 20147

#### **Cancellation and Refund Policy**

If you are unable to attend a virtual conference, you may cancel up to two days before the event to receive a full refund. No-shows (or cancellations made after the start of the program) will forfeit the entire registration fee. Cancellations must be submitted to **learningcenter@ ncmahq.org**. Please allow 30 days for processing.



### Site Registrant Information - Site 2 (Print Clearly)

Update My Contact Information

Update My Contact Information

Update My Contact Information

Update My Contact Information

NAME		NCMA MEMBER #
TITLE	ORGANIZATION	
ADDRESS		SUITE/APT.#
CITY	STATE	ZIP
PHONE NUMBER (WORK)	FAX NUMBER	
E-MAIL (REQUIRED FOR CONFIRMATION)		

# Site Registrant Information - Site 3 (Print Clearly)

NAME		NCMA MEMBER #
TITLE	ORGANIZATION	
ADDRESS		SUITE/APT.#
CITY	STATE	ZIP
PHONE NUMBER (WORK)	FAX NUMBER	
E-MAIL (REQUIRED FOR CONFIRMATION)		

## Site Registrant Information - Site 4 (Print Clearly)

NAME		NCMA MEMBER #	
TITLE	ORGANIZATION		
ADDRESS		SUITE/APT.#	
CITY	STATE	ZIP	
PHONE NUMBER (WORK)	FAX NUMBER		

E-MAIL (REQUIRED FOR CONFIRMATION)

## Site Registrant Information - Site 5 (Print Clearly)

NAME		NCMA MEMBER #
TITLE	ORGANIZATION	
ADDRESS		SUITE/APT.#
CITY	STATE	ZIP
PHONE NUMBER (WORK)	FAX NUMBER	

E-MAIL (REQUIRED FOR CONFIRMATION)

If you need to register more than five sites, please print additional copies as necessary.

