

Registration Form

- **Registration Fee Includes:** Five (5) nights lodging at Mammoth Hotel (each participant will have a separate hotel room or cabin; all instruction and seminar materials; in-park transportation for five days; and reception and dinner the first night, lunch Tuesday and breakfast Wednesday.
- **E-mail:** Completed registration form to Felicia Durham at durhamf@aacscu.org.
- **Fax:** Completed registration form with credit card information to AASCU at 202.296.5819.
- **Mail:** Completed registration form with payment to Felicia Durham, Staff Associate, AASCU, 1307 New York Avenue, NW • 5th Floor, Washington, DC 20005-4701.
- **Registration Questions:** Contact Felicia Durham at durhamf@aacscu.org or 202.478.4673.

REGISTRATION INFORMATION

Name: _____

First Name for Name Badge: _____

Title: _____

Institution: _____

Mailing Address: _____

City/State/Zip: _____

Office Ph: _____ Fax: _____ E-mail: _____

Cell Ph: _____ Twitter Handle: _____

SEMINAR FEE

	FEE	QUANTITY	TOTAL
Registration	\$1,395	_____	\$ _____

SPECIAL SERVICES

■ Requirement: _____

■ Special Diet: Diabetic Vegetarian Allergy to: _____

EMERGENCY CONTACT (provide name and day/evening phone numbers of designated individual)

Name: _____ Relationship: _____

Day Ph: _____ Evening Ph: _____

PAYMENT PROCESSING

To reserve your space, payment must accompany registration form.

AmEx MasterCard VISA Discover

Card #: _____ Expiration Date: _____ Security Code: _____

Name (on card): _____ Signature: _____

FOR OFFICE USE ONLY			
Batch # _____	Check # _____		
Amt Paid: \$ _____	Ref Due: \$ _____	Date: _____	Reg ID #: _____